

P96000036772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200057754142

08/23/05--01011--003 \*\*52.50

FILED  
05 AUG 22 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NIC  
28



**DANIEL BAILEY, D.D.S.**  
FAMILY & COSMETIC DENTISTRY

19916 N.W. 2ND AVE.  
MIAMI, FL 33169  
TELEPHONE: (305) 652-3131  
FAX: (305) 652-1215

August 19, 2005

Florida Department of State  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: **Family & Cosmetic Dentistry, Inc**  
**Document# P96000036772**

Dear Sir or Madam:

Please find attached a Corporation Reinstatement application as well as an Articles of Amendment application. We were originally incorporated 4/26/1996. We allowed our status to become inactive. At this time we would like to have our corporation reinstated. My understanding is that we can no longer use the name Family and Cosmetic Dentistry, Inc.

I have included the amendment form to change the name to: Family and Cosmetic Dentistry, Inc. of Miami Gardens. There are no other changes. We have also included a check in the amount of \$1,800.00 for reinstatement as well as a check for \$52.50 for the amendment.

If you have any questions or concerns, please do not hesitate to contact me at (305)652-3131.  
Sincerely,

*Faith Miles Bailey*

Faith Miles-Bailey  
Office Manager

RECEIVED  
AUG 22 2005  
DIVISION OF CORPORATIONS  
AM 8:00

Articles of Amendment  
to  
Articles of Incorporation  
of

Family and Cosmetic Dentistry, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

P96000036772

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

Family and Cosmetic Dentistry, Inc. of Miami Garden

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

(A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

\* only name change

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: 08/19/2005

Effective date if applicable: 08/19/2005  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_."  
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 19<sup>th</sup> day of August, 2005

Signature

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Daniel L. Bailey, DDS

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35