P970000 10924

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' COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ARTISTIC C & B	DENTAL LABORATOR	Y	
DOCUMENT NUMB	ER:			
	f Amendment and fee are sub	omitted for filing.		
Please return all corresp	oondence concerning this nut	ter to the following:		
	MIN H. SO			
-	Name of Contact Person			
	MIN H. SO LAW FIRM PA			
-		Firm/ Company		
	5401 S KIRKMAN ROAD. S	SUITE 310		
-		Address		
	ORLANDO / FLORIDA 32819			
-		City/ State and Zip Coo	de	
	FERDIEPILE@GMAIL.COM	М		
-	E-mail address: (to be us	ed for future annual repor	t notification)	
For further information concerning this matter, please call:				
MIN H. SO		at (370-7140	
Name o	f Contact Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment of State:	
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi: P.O.	ing Address Inducent Section Ission of Corporations Box 6327 Ithassee, FL 32314	Amer Divise The C 2415	t Address adment Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303	

Articles of Amendment to Articles of Incorporation of

ARTISTIC C & B DENTAL LABORATORY

			٠- ١	
(<u>Name (</u>	of Corporation as currently	filed with the Florida Dept. of State)	100	5
P97000010924			更小	U.
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this <i>F</i>	Torida Profit Corporation adopts the following	ng amendme	nt(s) to
A. If amending name, enter the new n.	ame of the corporation:			
			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviati professional corporation name must coma	on "Corp.,"	
B. Enter new principal office address,				
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)			
C. Enter new mailing address, if appli				
(Mailing address MAY BE A POST)	OFFICE BOX)			
			·	
D. If amending the registered agent ar	nd/or registered office addr	ess in Florida, enter the name of the		
new registered agent and/or the new				
Name of New Registered Agent	FERDINAND PILE		_	
	1421 PINE HILLS ROAD			
	(Florida stre	et address)	_	
New Registered Office Address:	ORLANDO	. Florida ³²⁸⁰⁸		
A WAY CONTRACTOR OF THE CONTRACTOR			Codei	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar w	ith and accept the obligations of the position.		
	felial P	il		
	Signature of New Re	gistered Agent, if changing	_	

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as on Add.

Example: X Change	PT	John Do	<u>c</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	P		KAP SU HAN	326 PINE STRAW CIR
Add		_		ALTAMONTE SPRINGS
X Remove				FLORIDA 32714
2) Change	PDTS		FERDINAND PILE	1421 PINE HILLS ROAD
X Add		_		ORLANDO, FL 32808
Remove 3.) Remove		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

The date of each amendment		, if other than the
date this document was signed	JUNE 30, 2022	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	his block does not meet the applicable statutory filing requirements, this date to Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d 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	ATTAĤÁ
by	· · · · · · · · · · · · · · · · · · ·	AS: -
	(voting group)	22 SSEE
June 3 Dated_	0, 2022	2022 JUL 22 PM 1: ALLAHÁSSÉEZ FLOR
Signature	variation president or other officer – it directors or officers have not been	——————————————————————————————————————
sc	leaded, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	KAP SU HAN	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)