## P98000058801

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

1.

NAME OF COR	PORATION: PAUL A. MARCH	IAND DDS, PA			
DOCUMENT NU	JMBER: P98000058801	<u></u>			
	cles of Amendment and fee are su	bmitted for filing.			
Please return all co	orrespondence concerning this ma	tter to the following:			
	HERBERT E. DEUSCHEL				
		Name of Contact Person			
	MARC E. O'CONNER, CPA	MARC E. O'CONNER, CPA, PA			
	<u> </u>	Firm/ Company			
	9710 STIRLING ROAD, SU	ITE 107			
		Address			
	COOPER CITY, FL 33024				
		City/ State and Zip Code	:		
	HD@MEO-СРА.СОМ				
	E-mail address: (to be us	sed for future annual report	notification)		
For further inform	ation concerning this matter, pleas	se call:			
HERBERT E. DE	USCHEL	at (	546-1130		
Na	me of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	e □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

( <u>Name o</u>	f Corporation as currently filed	<u>l with the Florida Dept. c</u>	of State)
P98000058801			
	(Document Number of Corp	poration (if known)	
Pursuant to the provisions of section 607. as Articles of Incorporation:	1006, Florida Statutes, this <i>Florid</i>	la Profit Corporation ado	ots the following amendment(s
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and contain Inc.," or Co.," or the designation "C 'chartered," "professional association,"	orp," "Inc," or "Co". A proj	iny," or "incorporated" or Cessional corporation nan	the abbreviation "Corp.," we must contain the word
B. Enter new principal office address, Principal office address MUST BE A S			
	_		707
	<del></del>	<del></del>	
Enter new mailing address, if appli (Mailing address MAY BE A POST of			;
(Maining address MAT DE AT 031 C		_	
	_		1.12: 23
	_		
). If amending the registered agent an		Florida, enter the name	of the
new registered agent and/or the new	DEUSCHEL, HERBERT		
Name of New Registered Agent	9710 STIRLING ROAD, SUITL		<u> </u>
	(Florida street ad	_	
V 0 V 1070 111	COOPER CITY		33024
New Registered Office Address:	(City)		Florida <u>(Zip Code)</u>
New Registered Agent's Signature, if cl hereby accept the appointment as registe		nd accept the obligations o	of the position.
	Character as of Vana Davinta	red Agent, if changing	<del></del>
	Mynature of New Registe	ren agem, y enanging	

☐ 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 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 an Add.

Example: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			<u></u>
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<del></del>
Remove			<del> </del>
6) Change	-		
Add			<del></del>
Remove			

. If amending or adding additional Ar (Attach additional sheets, if necessary).	. (Be specific)
<del></del>	
<del></del>	
If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
=	

•

	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fue date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder ac	ction and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendmes sufficient for approval.	nt(s)
	pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	Г 26, 2020	
Dated		
Signature 🕜	as le Warland DDS PH	
(By a selec	director, president or other officer – if directors or officers have not bee ted, by an incorporator – if in the hands of a receiver, trustee, or other co inted fiduciary by that fiduciary)	
	PAUL A MARCHAND DDS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	