

**2021 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000042500

**Entity Name:** ANGELIC CHIROPRACTIC & HEALTH SERVICES, INC.

**Current Principal Place of Business:**

230 E. PARK AVE #27  
LAKE WALES, FL 33853

**Current Mailing Address:**

230 E. PARK AVE #27  
LAKE WALES, FL 33853 US

**FEI Number:** 75-3097340

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JOHNSON, BERNICE A DR.  
230 E. PARK AVE #27  
LAKE WALES, FL 33853 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** BERNICE A JOHNSON D.C.

01/04/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            JOHNSON, BERNICE A DR.  
Address        230 E. PARK AVE #27  
City-State-Zip: LAKE WALES FL 33853

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BERNICE A. JOHNSON

DR.

01/04/2021

Electronic Signature of Signing Officer/Director Detail

Date