H59813

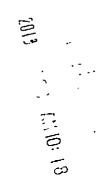
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ROGER A. BOHN.	D.C., P.A.	
DOCUMENT NUMBER: H59	813		
The enclosed Articles of Amenda	ment and fee are sub	nitted for filing.	
Please return all correspondence	concerning this matte	er to the following:	
Marc F. C	Dates, Esq.		
		Name of Contact Person	
Marc F. C	Dates, P.A.		
		Firm/ Company	
5515 Bry	son Drive, Suite 502		
		Address	
Naples, F	T. 34109		
		City/ State and Zip Code	
		•	
marc@marcoat			
E-m	ail address: (to be use	ed for future annual report	nonneation)
For further information concern	ing this matter, please	e call:	
Marc Oates		at (598-1136
Name of Contac	t Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the follo	owing amount made p	payable to the Florida Depa	rtment of State:
	43.75 Filing Fee & ertificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add Amendment Division of C P.O. Box 633 Tallahassee.	Section Corporations 27	Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

	of
ROGER A. BOHN, D.C., P.A.	3/2
(Name of Corporation :	s currently filed with the Florida Dept. of State)
H59813	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statis Articles of Incorporation:	ntutes, this Florida Profit Corporation adopts the following amendm
A. If amending name, enter the new name of the corpo	oration:
	The nev
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the abl	corporation," "company," or "incorporated" or the abbreviatio Inc," or "Co". A professional corporation name must contain the reviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered	office address in Florida, enter the name of the
new registered agent and/or the new registered of	ice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	ered Agent:

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = CF Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each off 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 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	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One) 1) X Change	D/P/T	Bohn, Roger A. D.C.	27970 Crown Lake Blvd.
		_	Suite 1
Add Remove			Bonita Springs, FL 34135
	D/VP/S	Peterson Bohn, Amy C.	27970 Crown Lake Blvd.
2) Change X		<u> </u>	Suite 1
Add			Bonita Springs, FL 34135
Remove			
3) Change	_		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(hanga			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
Attach adamond sneets, y neetssays (100 140 250)	
	_
If an amendment provides for an exchange, reclassification, or cancellation of issued share	<u>28.</u>
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	_
/	
	

The date of each amendment(s) adoption:, if other than, and other than
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
☐ The amendment(s) was/were adopted 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.
Dated 8/27/19
Signature Shy
(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)
Ruger Bohn
(Typed or printed name of person signing)
PTSD
(Title of person signing)