

NO80000000806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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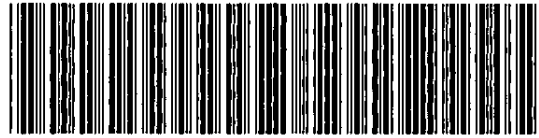
(Business Entity Name)

(Document Number)

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08 FEB 14 PM 4:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts FEB 14 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: American Professional Sports Chiropractic Association, Inc.

DOCUMENT NUMBER: N08000000806

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert A. Gross, Esq.

(Name of Contact Person)

Siegel, Greenfield, Hayes & Gross PLC

(Firm/ Company)

One Towne Square, Suite 1835

(Address)

Southfield, Michigan 48076

(City/ State and Zip Code)

For further information concerning this matter, please call:

Robert A. Gross

(Name of Contact Person)

at (248) 263-3535

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

American Professional Sports Chiropractic Association, Inc.

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

N08000000806

(Document number of corporation (if known))

FILED
08 FEB 14 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

Professional Athletes Chiropractic Association, Inc.

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

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

Article V is hereby amended and restated in its entirety to read as follows:

The name and Florida street address of the registered agent is:

Dr. Spencer Baron

13762 West State Road 84, Suite 135

Davie, Florida 33325

[Note: Acceptance of New Registered Agent is attached]

(Attach additional pages if necessary)
(continued)

The date of adoption of the amendment(s) was: February 8, 2008

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature _____

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

Dr. Spencer Baron

(Typed or printed name of person signing)

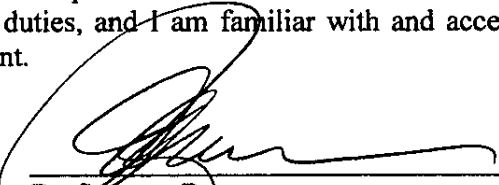
PRESIDENT / CEO.

(Title of person signing)

FILING FEE: \$35

ACCEPTANCE OF NEW REGISTERED AGENT

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.



Dr. Spencer Baron

Date: February 8, 2008