

N9900000/957

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City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
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4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment <i>MC</i>
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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FILED
99 MAY -5 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 7 0 1999

Examiner's Initials

TLL

ARTICLES OF AMENDMENT

to

ARTICLES OF INCORPORATION

of

A FREE CHIROPRACTIC MEDICINE CLINIC, INC.
(present name)

Pursuant to the provisions of section 617.1006, Florida Statutes, the undersigned Florida nonprofit corporation adopts the following articles of amendment to its articles of incorporation.

FIRST: Amendment(s) adopted: (INDICATE ARTICLE NUMBER(S) BEING AMENDED, ADDED OR DELETED.)

CHANGE ABOVE CORPORATE NAME TO:

"A DONATION OPTIONAL CHIROPRACTIC MEDICINE CLINIC, INC."

SECOND: The date of adoption of the amendment(s) was: 5/1/99

THIRD: Adoption of Amendment (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.

A DONATION OPTIONAL CHIROPRACTIC MEDICINE CLINIC, INC.
Corporation Name

Michael Dunn, D.C.
Signature of Chairman, Vice Chairman, President or other officer

MICHAEL DUNN, D.C.
Typed or printed name

DIRECTOR/CHAIRMAN 5/1/99
Title Date