P01000037626

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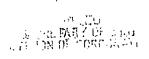
OCT 2 4 2016 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: JACHIMEK CH	IROPRACTIC CLINIC, P.	A	
DOCUMENT NUMB	ER: P01000037626		·	
The enclosed <i>Articles o</i>	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
	RICHARD H. JACH	ПМЕК		
_		Name of Contact Person	1	
	JACHIMEK CHIROPRA	ACTIC CLINIC, P.A.		
_	<u></u>	Firm/ Company		
	5111 EHRLICH ROAD	/ SUITE 128		
_		Address		
	TAMPA, FL 33624			
_		City/ State and Zip Cod	e	
	RJACHIMEK@TAMPA	ABAY.RR.COM		
	-	sed for future annual report	notification)	
For further information	concerning this matter, please	813	961-9415	
Name o	f Contact Person	at (Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate 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 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



JACHIMEK CHIROPRACTIC CLINIC, P.A.

2016 OCT 21 PM 2: 14

(Name of Co	rporation as curre	ntly filed with the Florida Dept. of State)
P01000037626		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name	of the corporation:	
N/A		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
D. Entan nerv primainal affice address if an	mlicable.	N/A
B. <u>Enter new principal office address, if ap</u> (Principal office address <u>MUST BE A STRE</u>		
C. Enter new mailing address, if applicabl	٥.	
(Mailing address MAY BE A POST OFF	<u>e.</u> ICE BOX)	N/A
D. If amending the registered agent and/or	registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new reg		
Name of New Registered Agent	N/A	
	(Florida	street address)
	(
New Registered Office Address:		, Florida (City) (Zip Code)
		(Zip Code)
New Registered Agent's Signature, if chang	ing Registered Age	nt:
		r 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, 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: X Change	<u>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jones				
_ <u>X</u> Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	Name	Address			
1) Change	PSD	RICHARD H. JACHIMEK	5111 EHRLICH ROAD			
Add			SUITE 128			
X Remove			TAMPA, FL 33624			
2) Change	VTD	GAIL C. JACHIMEK	5111 EHRLICH ROAD			
Add			SUITE 128			
X Remove			TAMPA, FL 33624			
3) Change	D	RICHARD H. JACHIMEK AND	4409 KETTLE CREEK COURT			
_ X Add		GAIL A.C. JACHIMEK LIVING TRUST	TAMPA, FL. 33624			
Remove						
4) Change						
Add						
Remove						
5) Change	·		<u></u>			
Add						
Remove						
6) Change			M			
Add						
Damaya						

75	KICHAR	2 p H.	VACHIA	15K AN	10 GAIL	A.C.	JACHIUAK	LIVING	TRU
<u>-</u>									
						·			_
									
provi		plementin	g the amend		ication, or ca		n of issued share dment itself:	e <u>s.</u>	
L ISSU	JED SHARE	ES TO RIC	CHARD H. JA	ACHIMEK A	ND GAIL C.	JACHIM	EK ARE TO BE	EXCHANGE	
ANSFI	ERRED, TO	THE RI	CHARD H. J	IACHIMEK	AND GAIL A	.C. JACI	IIMEK LIVING	TRUST,	
			<u></u>	····					

The date of each amendment(s	adoption:		if other than the
date this document was signed.	10/10/2016	TARY PARY	Ol Marian
Effective date <u>if applicable</u> :	10/18/2016		801 - R 2 C U *
<u> </u>	(no more than 90 days after amendment file date)	2016 OCT 21	PM 2: 14
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amend sufficient for approval.	iment(s)	
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment(
"The number of votes c	ast for the amendment(s) was/were sufficient for approval		
by	."		
·	(voting group)		
action was not required.	adopted by the board of directors without shareholder action and shareholder action and shareholder by the incorporators without shareholder action and shareholder		
action was not required.	adopted by the incorporators without shareholder action and sharehold	iuer	
Dated	0/18/2016	,	
Signature	Karland & Sectional		
sele	a director, president or other officer if directors or officers have no cted, by an incorporator — if in the hands of a receiver, trustee, or oth binted fiduciary by that fiduciary)		
	RICHARD H. JACHIMEK		
	(Typed or printed name of person signing)		
	PRESIDENT / SECRETARY / DIRECTOR		
	(Title of person signing)		