P03000019113

| (F | Requestor's Name) | | |
|------------------------|-------------------------|---------|--|
| | | | |
| (/ | Address) | | |
| | | | |
| (Address) | | | |
| | | | |
| | City/State/Zip/Phone #) | | |
| ,, | ony cumulant none ny | | |
| PICK-UP | ☐ WAIT | MAIL | |
| | | | |
| (E | Business Entity Name) | | |
| | | | |
| (Document Number) | | | |
| `` | , | | |
| Codified Conton | Cartificates of | Otation | |
| Certified Copies | Certificates of | Status | |
| | | | |
| Special Instructions t | o Filing Officer: | | |
| | | ĺ | |
| | | [| |
| | | | |
| | | | |
| | | { | |
| | | : | |
| | | | |
| | · | | |

Office Use Only



300028786323

02/20/04--01051--017 **35.00

FILED

04 FEB 20 PH 2: 28

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Amond

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

| SUBJECT: JBA | Chiropractic Center, Inc. | | |
|--|--|---|---|
| DOCUMENT N | NUMBER: P03000019113 | | · |
| The enclosed Ar | ticles of Amendment and fee a | re submitted for filing. | |
| Please return all | correspondence concerning thi | is matter to the following: | |
| Ha | aviv Roitman | | |
| | (Na | ume of Person) | |
| JB | A Chiropractic Center, Inc. | | |
| | | of Firm/ Company) | |
| 12 | 2 E. Colonial Dr., Suite 102 | | · |
| | · · · · · · · · · · · · · · · · · · · | (Address) | |
| Or | tando, FL 32801 | | _ |
| | • | tate/ and Zip Code) | |
| For further infor | mation concerning this matter, | please call: | |
| Haviv Roitman | | at (_407) _650-3911 | |
| • | (Name of Person) | (Area Code & Daytime | Telephone Number) |
| Enclosed is a che | eck for the following amount: | | |
| Ø \$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 | | Street Address Amendment Section | |
| Amendment Section Division of Corporations | | Division of Corporations | |
| P.O. Box 6327 | | 409 E. Gaines Street | |
| Tallahace | 900 EI 3231A | Tallahassaa El 37300 | • |

Articles of Amendment to Articles of Incorporation of

| F | FILED |
|-----------|---|
| 04 FEB | POSED |
| TALLAHACA | 20 PM 2:28 |
| .,33 | 20 PM 2:28 Y OF STATE EE, FLORIDA |

JBA Chiropractic Center, Inc.

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

P03000019113

(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) Article Five is amended as follows: add Vice President whose name is: Cheryl L. Roitman, 122 E. Colonial Dr., Suite 102, Orlando, FL 32801.02 (Attach additional pages if necessary) If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

| The date of each amendment(s) adoption: 02/18/04 |
|--|
| Effective date if applicable: |
| (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) (CHECK ONE) |
| ☐ The amendment(s) was/were approved 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. |
| Signed this 18th day of February 2004 Signature (By a director, president of 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) |
| (Typed or printed name of person signing) |
| Incorporator (Title of person signing) |

FILING FEE: \$35