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11-2707

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORP	oration: 163m	d Chiropenati	c Clinic ING
DOCUMENT NU	MBER: P0600	000 93999	
The enclosed Artic	les of Amendment and fee ar	e submitted for filing.	
Please return all co	rrespondence concerning this	s matter to the following:	
	R.D. COPFLA	ND. D.C. of Contact Person)	
	163rd Chik	COPERCTIC CLIN	IC INC
	P.D. Box 2	928 (Address)	
	PALM BEAC (City/St	H. FIORIDA ate and Zip Code)	33480
For further informa	ation concerning this matter,	please call:	
R.DIANE	COPELAND,	at (<u>561) 714</u> (Area Code & Daytim	1-8677 te Telephone Number)
Enclosed is a check	k for the following amount:		
☑\$35 Filing Fee	S43.75 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 C	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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TALLAHASSEE. FLOSE

of Articles of Incorporation Of STATE Of STATE Of STATE
(Name of corporation as currently filed with the Florida Dept. of State)
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
PRIME Chiropractic Chiro And Rohab Clinic The (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
1. The Name of 163rd Chimpenetic Climo Shall be
Changed to Prime Chropractic And Rehab Clinic INC.
2. The Address of the Former 163rd Chiropractic Clinic,
INC. NOW KNOWN AS PRIME Chiropractic AND Rehab
CLINICIOSHALL De: 18250 NW 2nd Avenue, Suite 100
MIAMI GARdens, Florida 33169
(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: November 12,2007 Effective date if applicable: November 12,2007
Effective date if applicable: November 12,2007 (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.
Signature Signature
(Typed or printed name of person signing) President
(Title of person signing)

FILING FEE: \$35