2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000128887

Entity Name: HILL FAMILY CHIROPRACTIC, P.A.

FILED Oct 24, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
821 N. NO UNIT #1	VA ROAD				
	BEACH, FL	32117			
Current Mailing Address:			New Mailing Address:		
821 N. NO UNIT #1 DAYTONA	VA ROAD BEACH, FL	32117			
FEI Number:	: 20-5682808	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
444 SEÁBI SUITE 900	EFFREY P REEZE BLVD) \ BEACH, FL	32118 US			
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE: JEFFER	Y P. BROCK			
	Electro	nic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (HILL, MICHAE 184 PINE WOO ORMOND BEA	DDS ROAD	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL L. HILL, D.C. PRES 10/24/2008