

PO 7000 133890

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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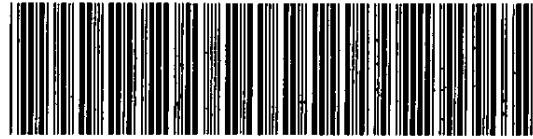
(Business Entity Name)

(Document Number)

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2008 AUG 12 AM 10:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend  
Tennis  
8-13-08*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Flagler Family Chiropractic Center, Inc.

**DOCUMENT NUMBER:** P07000133890

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sergio Milo

(Name of Contact Person)

Flagler Family Chiropractic Center, Inc.

(Firm/ Company)

85 Grand Canal Drive # 300

(Address)

Miami, Florida 33144

(City/ State and Zip Code)

For further information concerning this matter, please call:

Sergio Milo

(Name of Contact Person)

at ( 305 ) 265-9902

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$5 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

RECEIVED  
JUL 28 AM 9:00  
TALLAHASSEE, FL  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 30, 2008

SERGIO MILO  
FLAGLER FAMILY CHIROPRACTIC CENTER, INC.  
85 GRAND CANAL DRIVE, #300  
MIAMI, FL 33144

SUBJECT: FLAGLER FAMILY CHIROPRACTIC CENTER, INC.  
Ref. Number: P07000133890

We have received your document for FLAGLER FAMILY CHIROPRACTIC CENTER, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation").

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 508A00043839

RECEIVED  
2008 AUG 12 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2008 AUG 12 AM 10:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Flagler Family Chiropractic Center, Inc.

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

P07000133890

(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.")  
(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)

**Article 5 - Registered Agent**

New Registered Agent : Sergio Milo



85 Grand Canal Drive # 300 Miami, FL 33144

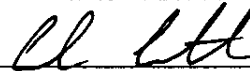
**Article 7 - Officer / Director of Corporation**

New Officer /President: Sergio Milo



85 Grand Canal Drive # 300 Miami, FL 33144

Resigning Officer/ President: Carla B Catalan



6410 Main Street # 6-204 Miami Lakes, FL 33014

(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)

N/A

(continued)

The date of each amendment(s) adoption: July 21, 2008

Effective date if applicable: July 21, 2008  
(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

  
(By a director, president or 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)

Carla B Catalan

(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE: \$35**