P05000024471

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MAY 29 2013



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT			liness inc.
DOCUMENT NUMBER	P0800002447	1	
The enclosed Articles of A	mendment and fee are su	bmitted for filing,	
Please return all correspon	dence concerning this ma	tter to the following:	
Ha	ans Kennon, Es	squire	
		Name of Contact Persor	
Me	organ & Morgai	ո, P.A <i>.</i>	
		Firm/ Company	
20	North Orange	Avenue, 4th Flo	or
		Address	
Oı	1ando, FL 3280)1	
		City/ State and Zip Code	
hkenr	on@forthepeo	ole.com	
		sed for future annual report	notification)
For further information con	ncerning this matter, pleas	se call:	
Hans Kennon		at (407	, 420-6686
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for the	following amount made p	payable to the Florida Depa	artment of State:
S35 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)
Amendn Division P.O. Box	Address nent Section of Corporations x 6327 see, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building executive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation

ΑJI	Care	Chiropractic	ጼ	Wellness	Inc
/ 161	Juic	Of the Objection	U.	* * G	$\mathbf{H} \cdot \mathbf{U}$

P0800024471	the Florida Dept. of State)
(Document Number of Corporati	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>
N/A	The new
name must be distinguishable and contain the word "corpo "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviat	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
NIA	11 (53).
Name of New Registered Agent NIA	
(Flori	da street address)
NI/A	,
<u>New Registerea Office Adaress.</u>	City) (Zip Code)
	•
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	
, approximate a segment and a segment and segment	
Signature of New Registe	ered 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.

X Change	PT Joh	n Doe	
X Remove	Y Mik	<u>se Jones</u>	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>V</u>	Sean Leotta	5287 Alhambra Drive
Add			Orlando, FL 32808
X Remove			
2) Change	<u>T</u>	Sean Leotta	5287 Alhambra Drive
Add			Orlando, FL 32808
X Remove			
3) Change	<u>V</u>	Kathleen Leotta	5287 Alhambra Drive
X Add			Orlando, FL 32808
Remove			
4) Change	<u>T</u>	Kathleen Leotta	5287 Alhambra Drive
X Add			Orlando, FL 32808
Remove			
5) N/A Change			
Add			
Remove			
6) N/A Change			
Add			-
Remove			

4	ets, if necessary).	(ве ѕресілс)			
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The date of each amendment(s)	adoption: May 23, 2013
Effective date <u>if applicable:</u>	May 23, 2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of by N/A	ast for the amendment(s) was/were sufficient for approval
	(voting group)
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
_{Dated} May	23, 2013
Signature	a director, president or other officer – if directors or officers have not been
sele	cted, by an incorporator - if in the hands of a receiver, trustee, or other court
appo	pinted fiduciary by that fiduciary)
	Kathleen Leotta
	(Typed or printed name of person signing)
	V/T
	(Title of person signing)