

P08000051741

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TALLAHASSEE, FLORIDA

AMEND  
CCE  
CCE 7/30



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 24, 2008

CHARLENE SIRENORD  
GLORY CHIROPRACTIC CARE, INC.  
4143 TAMiami TRAIL EAST  
NAPLES, FL 34112

SUBJECT: GLORY CHIROPRACTIC CARE, INC.  
Ref. Number: P08000051741

We have received your document for GLORY CHIROPRACTIC CARE, 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 fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson  
Document Specialist Supervisor

Letter Number: 008A00043031

**COVER LETTER**

**TO: Amendment Section**  
Division of Corporations

**NAME OF CORPORATION:** GLORY CHIROPRACTIC CARE, INC

**DOCUMENT NUMBER:** P08000051741

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

Please return all correspondence concerning this matter to the following:

CHARLENE SIRENORD

(Name of Contact Person)

GLORY CHIROPRACTIC CARE, INC

(Firm/ Company)

4143 TAMiami TRAIL EAST

(Address)

NAPLES, FL 34112

(City/ State and Zip Code)

For further information concerning this matter, please call:

CHARLENE SIRENORD

(Name of Contact Person)

at ( 239 ) 200-1935

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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  
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

2008 JUL 24 AM 8:00  
RECEIVED  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Articles of Amendment  
to  
Articles of Incorporation  
of

GLORY CHIROPRACTIC CARE, INC

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

P08000051741

(Document number of corporation (if known))

FILED  
08 JUL 24 AM 9:54  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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)**

ADDING VLADIMIR MATHIEU MD AS VICE PRESIDENT OF GLORY CHIROPRACTIC CARE, INC

EFFECTIVE 07/22/2008

HIS ADDRESS IS 1970 OAKES BLVD, NAPLES, FL 34119

(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: 07/22/2008

Effective date if applicable: 07/22/2008  
(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

Charlene Sirenord

(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)

CHARLENE SIRENORD

(Typed or printed name of person signing)

CORPORATE REGISTERED AGENT

(Title of person signing)

ASSIST SEC.

**FILING FEE: \$35**