

P08000051741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

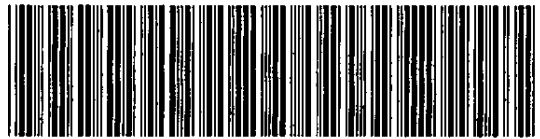
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2009 OCT -9 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

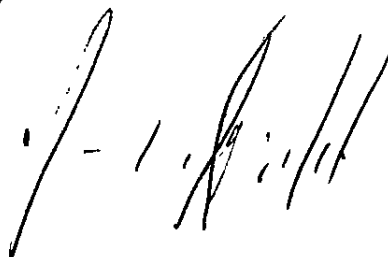
OCT 12 2009

Urgent

To whom it may concern:

I am notifying the Florida Department of State Division of Corporations that Charlene Sirenord registered agent was never given authority or permission to remove Dr. Dean Elliot Draluck Owner and President of Glory Chiropractic Care, Inc; and in the position of President. I insist that the correction of Adding Dr. Dean Elliot Draluck back in the position of president and registered agent and removing Charlene Sirenord as President, Registered Agent or any other position in this corporation be effective immediately. I Dr. Dean E. Draluck have never signed any paperwork removing myself as president. This business is closed and dissolution papers are being sent. If you have any questions please do not hesitate to call me directly at 239-207-6201 or e-mail me at messianicdoc@yahoo.com. Please correct this.

Sincerely,

A handwritten signature in black ink, appearing to read "D. Draluck". The signature is stylized with a large initial "D" and a long horizontal stroke.

Dr. Dean E. Draluck, D.C.

President/Owner

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:

Dr. Dean Elliot Draluck
Name of Contact Person

Glory Chiropractic Care, Inc.
Firm/Company

4143 E. Tamiami Trail
Address

Naples, FL 34112
City/ State and Zip Code

messianicdoc@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dr. Dean E. Draluck at (239) 20-6201
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$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

Articles of Amendment
to
Articles of Incorporation
of

Glory Chiropractic Care, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

PO 8000051741

(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:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Dean Elliot Draluck

New Registered Office Address:

4143 E. Tamiami Trail

(Florida street address)

Naples

(City)

34112, Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

/s/ Dean Elliot Draluck
Signature of New Registered 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)

Title	Name	Address	Type of Action
Reg. Agent	Charlene Sirenord	8690 Weir dr. 208 Naples, FL 34104	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	Charlene Sirenord	8690 Weir dr. 208 Naples, FL 34104	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
President + Owner	Dr. Dean E. Draluck	4143 E. Tamiami Trail Naples, FL 34112	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

I am The president, and Owner of
Glory Chiropractic / Dr. Dean Elliot
Draluck.

Charlene Sirenord never had my permission
or Authority to make any changes
regarding me as president and Adding

**F. If an amendment provides for an 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)

herself as such. This must be
Corrected. Dr. Dean Draluck
president + Owner
of Glory Chiropractic
Care, Inc.

The date of each amendment(s) adoption: 10-6-09

(date of adoption is required)

• Effective date if applicable: 10-6-09

(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted 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.

Dated 10-6-09

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)

Dr. Dean Elliot Draluck

(Typed or printed name of person signing)

President / Owner

(Title of person signing)

president and
owner