2014 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Feb 05, 2014
Secretary of State

DOCUMENT# P09000015475

Entity Name: CHIROPRACTOR MEDICAL SERVICES, INC.

Current Principal Place of Business:

13397 55TH RD N
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

1140 WEST 50 ST
208
HIALEAH, FL 33012

Current Mailing Address:

13397 55TH RD N
ROYAL PALM BEACH, FL 33411

New Mailing Address:

1140 WEST 50 ST
208
HIALEAH, FL 33012

FEI Number: 26-4277533 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLEITAS, ABEL
8925 OKEECHOBEE BLVD APT 304
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

MARTINEZ, HUMBERTO
1140 WEST 50 ST
208
HIALEAH, FL 33012 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HUMBERTO MARTINEZ 02/05/2014
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: MARTINEZ, HUMBERTO
Address: 1140 WEST 50 ST SUITE 208
City-St-Zip: HIALEAH, FL 33012

I hereby 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 all other like empowered.

SIGNATURE: HUMBERTO MARTINEZ P 02/05/2014
Electronic Signature of Signing Officer or Director Date