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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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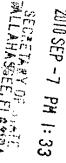
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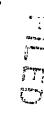


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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORI	PORATION: OSCEOLA	CHIROPRACTIC & WEL	LNESS CENTER
DOCUMENT NU	MBER:	P09000094595	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
		VID GREYDINGER	
	N	ame of Contact Person	
	OSCEOLA CHIROPE	RACTIC & WELLNESS CENT	ER P.A.
		Firm/ Company	
	1065 N	. JOHN YOUNG PKWY	
		Address	
	KIS	SIMMEE, FL 34741	
	, C	ity/ State and Zip Code	
	LEONID@ E-mail address: (to be use	GONTARCPA.COM d for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
DAV	/ID GREYDINGER	#! \	102-0474
Name	e of Contact Person	Area Code & Daytime Te	elephone Number
Enclosed is a chec	k for the following amount m	nade payable to the Florida Depa	rtment of State:
	\$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 A Amendmen Division o P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

#### **Articles of Amendment**

#### **Articles of Incorporation**

### OSCEOLA CHIROPRACTIC & WELLNESS CENTER P.A.

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

#### P09000094595

(Document Number of Corporation (if known)

MILANASSE PHILASSE PH provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following

	The ne
breviation "Corp.," "Inc.," or Co.," or	tain the word "corporation," "company," or "incorporated" or the designation "Corp," "Inc," or "Co". A professional corporation "professional association," or the abbreviation "P.A."
Enter new principal office address, if rincipal office address MUST BE A ST	f applicable:  [REET ADDRESS]
Enter new mailing address, if applic (Mailing address MAY BE A POST O	
If amending the registered agent and new registered agent and/or the new	d/or registered office address in Florida, enter the name of the v registered office address:
Name of New Registered Agent:	DAVID GREYDINGER
New Registered Office <u>Address</u> :	1065 N. JOHN YOUNG PKWY (Florida street address)
	KISSIMMEE, Florida 34741

Page 1 of 3

## 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P</u>	ANDREW MERRILL	3747 DERRAN LN ORLANDO, FL 32811	_ □ Add _ ☑ Remove
<u>P</u>	DAVID GREYDINGER	1065 N. JOHN YOUNG PKWY KISSIMMEE, FL 34741	∠ ☑ Add □ Remove
			_
	ding or adding additional Articles, entendeditional sheets, if necessary). (Be spe		
	,		
<u>provisi</u>	nendment provides for an exchange, reons for implementing the amendment in ot applicable, indicate N/A)	eclassification, or cancellation of issifunction of issifunct contained in the amendment	sued shares, itself:
<u> </u>			
_			

The date of each amendment(s) adoption: AUGUST 24, 2010
Effective date if applicable: AUGUST 25, 2010
Effective date if applicable: AUGUS 1 25, 2010  (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 statemes 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 AUGUST 24, 2010
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)
ANDREW C. MERRILL
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)