# P/WW0/17/9

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PICK-UP	WAIT	MAIL
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### COVER LETTER ,

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	on: Adva	ance Chiropractic Life Ce	nter,Inc.
DOCUMENT NUMBER:		P10000011719	
The enclosed Articles of Am	endment and fee are	submitted for filing.	
Please return all corresponde	ence concerning this	matter to the following:	
		ui Lin O'Connor	
	Nar	ne of Contact Person	•
		Firm/ Company	<del></del>
	66	Eagle Harbor Tr,	
Address			
	Palm Coast FL 32164 City/ State and Zip Code		
E-n	advanceo	dlife10@aol.com for future annual report notification)	<del></del>
For further information cond	erning this matter, p	lease call:	
Stephanie C	)'Connor	at ( 386 ) 3	385896
Name of Contact	Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check for the f	ollowing amount ma	de payable to the Florida Depart	iment of State:
	75 Filing Fee & tificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	
Mailing Address Amendment Section Division of Corporat P.O. Box 6327	ions	Street Address Amendment Section Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation

2010 MAR 22 AM 7:36

SEE FLORING

Advance Chiropractic Life Center, Inc.

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

#### P 10000011719

(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:

	iropractic Life C		The new
ne must be distinguishable and contain breviation "Corp.," "Inc.," or Co.," or th me must contain the word "chartered," "p	he designation "C	orp," "Inc," or "Co". A profe	ssional corporation
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u> )		801 West Granada Bivd	<del></del>
		#101	
		Ormond Beach, FL 32174	<b>.</b>
			name of the
new registered agent and/or the new re-			name of the
If amending the registered agent and/or new registered agent and/or the new registered agent:  Name of New Registered Agent:  New Registered Office Address:	gistered office ad		name of the
new registered agent and/or the new registered Agent:	gistered office ad	ida street address)	, Net
new registered agent and/or the new registered Agent:	ristered office addition (Florical City)	da street address)  , Flori (Zip Code)	da.

## 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
		·	
	<del></del>	- N/	☐ Remove
E. If amen (attach d	nding or adding adding adding adding adding additional sheets, if ne	ional Articles, enter change(s) here: cessary). (Be specific)	
		NA	
provis	mendment provides ions for implementin not applicable, indica	for an exchange, reclassification, or cancellage the amendment if not contained in the amete N/A)	tion of issued shares, endment itself:
		pr /	

The date of each amendment(s)	adoption: 3 - 17 - 20/0
•	(date of adoption is required) 3 -17-2010  no more than 90 days after amendment file date)
0	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were 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 can	st for the amendment(s) was/were sufficient for approval
by	,,
(v	oting 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 3 -1	7-2010
Signature	Julillan
	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court
	nted fiduciary by that fiduciary)
	610
	Hui Lin O GNNOR  (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	V. P.
	(Title of person signing)