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COVER LETTER

Division of Corporations NAME OF CORPORATION: James M. Yadanza D.C., P.A. DOCUMENT NUMBER: P1000076917 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: James Yadanza Name of Contact Person Firm/ Company 100 Madrid Blvd Suite 311 Address Punta Gorda , Fl. 33950 City/ State and Zip Code mtyadanza@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (941) 639-2900
Area Code & Daytime Telephone Number James Yadanza Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee □\$43.75 Filing Fee & **■\$43.75** Filing Fee & ☐ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

is enclosed)

Articles of Amendment to Articles of Incorporation of

FILED

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James M. Yadanza, D.C., P.A. (Name of Corporation as co	urrently filed with the Florida Dept. of State
().	SECRETARY OF STATE
P10000076917	imber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statut its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	<u>tion:</u>
	The new
name must be distinguishable and contain the word "corporal". "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS.)	1/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florida, enter the name of the address:
Name of New Registered Agent N/	
77 /	
	Florida street address)
	Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	<u>red Agent:</u> familiar with and accept the obligations of the position.
N Signature	e of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President: T = Treasurer: S = Secretary: D = Director: TR = Trustee; C = Chairman or Clerk; CEO = Chief P = President; V = Vice President: T = Treasurer: If an officer/director holds more than one title, list the first letter of each office held. Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer. Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

\(\times \times \) \(\times

Example: <u>X</u> Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u> </u>	Sally Smith		
Type of Action (Check One)	Title	<u>Na</u>	<u>unç</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2)Change				
Add				
Remove 3) Change				
Add				
Auu Remove				
4)Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		 -		
Add				
Remove				

F		4 · - E · 4	i) hamar		
amending or add	ing additional Article eets, if necessary).	es, enter change(s (Re specific)	s) nere:		
. 10	seis, if necessary.	(The appearance)			
<u> </u>					-
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f an amendment	provides for an exch plementing the amerable, indicate N/A)	ange, reclassificat	tion, or cancellation	of issued shares,	
provisions for im	plementing the amer	ndment if not con	tained in the amen	<u>dment itself:</u>	
(if not applica	ıble, indicate N/A)				
NA					
/-'-{-{ - - - - - - - - - 					
					
					
					· · ·

	01/01/2021	, if other than the
The date of each amendment(s) add date this document was signed.	option: 01/01/2021	
Effective date if applicable: 01/01	/2021	
	(no more than 90 days after amend	lment file date)
Note: If the date inserted in this ble document's effective date on the Dep	ock does not meet the applicable statutory filinartment of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopaction was not required.	nted by the incorporators, or board of directors	without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes ficient for approval.	cast for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting group each voting group entitled to vote separately or	s. The following statement a the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for a	pproval
by		••
· · · · · · · · · · · · · · · · · · ·	(voting group)	
ściecte	rector, president or other officer – if directors of the bands of a received fiduciary by that fiduciary) James M. Yadanza	ver, trustee, or other coun
	(Typed or printed name of person s	igning)
	President	
	(Title of person signing)	