## P14000094434

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	, WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	



400267564824

12/18/14--01012--013 \*\*35.00

TA DEC 19 PH 2: 07

Manu Ch 8

12/22/14

## COYER LETTER

TO: Amendment Section Division of Corporations Key Chiropractic & Wellness, P.A. 14000094434 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sara Fairbrother Davis, Esq. Name of Contact Person The Law Offices of Travis R. Walker, P.A. Finn/ Company 1235 SE Indian Street, Suite 101 Address Stuart, FL 34997 City/ State and Zip Code saradavis@traviswalkerlaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (772 ) 708-9052 Area Code & Daytime Telephone Number Sara F. Davis Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: §35 Filing Fee □\$43.75 Filing Fee & □S43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Gertified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Key Uniropractic & wellness,	, P.A.		
(Name of Corporation as currently filed	with the Florida Dep	ot. of State)	
P14000094434			
(Document Number of Co	rporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Su its Articles of Incorporation:	atutes, this Florida Pr	rofit Corporation adopts the follo	wing amendment(s) to
A. If amending name, enter the new name of the corpo	oration:		
Key Chiropractiċ, P.A.			The new
name must be distinguishable and contain the word ""Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb	"Inc," or "Co". A p	oany," or "incorporated" or th rofessional corporation name m	e abbreviation
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>:77</u> )		
- Daniel			
C. Enter new mailing address, if applicable:			
(Mailing address MAY BEA POST OFFICE BOX)			<del></del>
, in the second of the second			
D. If amending the registered agent and/or registered		rida, enter the name of the	
new registered agent and/or the new registered offi	ice address:		
Name of New Registered Agent			
į.			
	(Florida street address	1	
New Registered Office Address:		. Florida	
	(Ciņ)	(Zip Code	)
ž, *			
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I at		ccent the ubliquitions of the posite	on.
i move, weep me appointment to registered agent. I the	m januara viin unu (ii	oveje na magamus sj mo prom	****
Simpleton of Nov.	Registered Agent, if cl	banging	
, againe of west	кодиненси <b>лусин. II С</b> І	magag	

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 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.

X Change	PT John D	<u>oe</u>	
X Remove	V Mike J	ones	
<u>X</u> Add	SV Sally S	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	*j		
Add			
Remove	\$- \$ \$		
2) Change			
Add	و لا له الم		
Remove	č.		
3) Change			
Add	# \ !		
Remove	* !:		
4) Change			
Add			
Remove	i i		
5) Change			
Add	:		
Remove			AND THE PROPERTY OF THE PROPER
6) Change			
Add		The said and a statement of the said and said a	
Remove	6 16 17 17 18		

If amending or	adding additional Articles, enter change(s) here:
Attach addition	al sheets, if necessary). (Be specific)
'A	
	; ;
<del></del>	
	j
	þ h
	t. Re Pe
	i i
	<u> </u>
	i p
If an amendme	nt provides for an exchange, reclassification, or cancellation of issued shares,
(if not an	implementing the amendment if not contained in the amendment itself: licable, indicate N/A)
'A	
	<u> </u>
·	,
	i de la companya de l
<del>~-</del>	<u>.                                    </u>
	7 *

the date of each amendment(s	) adoption:	_, if other than the
date this document was signed.		
Effective date if applicable:		
этемение на применове.	(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 east for the amendment(s) sufficient for approval.	
The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group emitted to vote separately on the amendment(s):	
"The number of votes	ast for the amendment(s) was/were sufficient for approval	
by	(voting 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 12/12	/14	
Signature		
selo	a director, president or other officer - if directors or officers have not been cted, by an incorporator - if in the hands of a receiver, trustee, or other court office fiduciary by that fiduciary)	
illiania, no y	Jared Matthew Key	
, ,	(Typed or printed name of person signing)	<del></del>
	President/Director	
	(Title of person signing)	and the second s