## P16000 58373

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## COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations .
NAME OF CORPORATION: FEEL AMAZING Spine and Joint Institute DOCUMENT NUMBER: P1600058373 TA
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Richard A. HilER  Name of Contact Person  FEEL AMAZING Spine And Joint Institute, Inc  Firm/ Company  3031 AIR PORT PULLING ROAD NORTH  Indicess  NAPLES, FLORIDA 34105  City/ State and Zip Code  DAWNALLICAS @ PA 1400. COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richard A. Hiler at (239) 821-6213  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & S52.50 Filing Fee & Certificate of Status (Additional copy is enclosed)
Mailing Address Street Address

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

## Articles of Amendment

to

## Articles of Incorporation

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FEEL AMAZING		JOINT INS	stitute, IN	<u>1</u> C
_	asserrently filed with th	<u>e Florida Dept. of State</u>	<u>e)</u>	
P16000583	> 1 5 it Number of Corporation (	if known)	<del></del>	—
	•			
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	tatutes, this <i>Florida Profit</i>	Corporation adopts the	following amendment(s)	) 10
A. If amending name, enter the new name of the corp	oration:			
			The new	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the ab	"Inc." or "Co". A proje:			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRI	<u>ESS</u> )			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
	<del></del>			
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		, enter the name of the		
Name of New Registered Agent				
	(Florida street address)			
New Registered Office Address:		, Florida_		
	(Cuy)		(Zip Code)	
			<u></u>	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. Ta		t the ablivations of the n	<del>हिन्</del> श्री	
rnoven, accept me opportunent as registered agent. Ta	m juminur sam ume acceps	THE WALLEST THE P		
			115 /	
Signatu	re of New Registered Ager.	nt, if changing		
			97. <b>98</b> 67. –	

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Mike Jones, V as Remov Example:	v, and Sa	lly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doc	
X Remove	$\underline{Y}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	$\sqrt{}$	DAWNA HILER	3031 Airport Fulling Rd. M. Aples, FL 34105
Add Remove			Maples, FL 34105
2) Change	_		
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
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Remove			
5) Change			<del></del>
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Remove			
6) Change	<del></del>		
Add			
Remove			

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		·
an amendment provides for an exchange, reclassification, or cancella	tion of issued shares,	
rovisions for implementing the amendment if not contained in the an (it not applicable, indicate N/A)	endment itself:	
(i) not appreame, mateure (NE)		
	<del> </del>	
	· · · · · · · · · · · · · · · · · · ·	
	<del>_</del> -	<del>-</del> · · · · ·

The date of each amendment(s) adoption:	, if other than
fate this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amen	dment <sub>i</sub> tile date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory fill document's effective date on the Department of State's records.	ng requirements, this date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval.	east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting group must be separately provided for each voting group entitled to vote separately or	·
"The number of votes cast for the amendment(s) was/were sufficient for ap	proval
by(voting group)	<u></u> .
(voting group)	
☐ The amendment(s) was were adopted by the board of directors without sharehold action was not required.	ler action and shareholder
The amendment(s) was were adopted by the incorporators without shareholder a action was not required.	ction and shareholder
Dated 11-12-2019	
Dated	
(By a director, president or other officer - if directors of	r officers have not been
selected, by an incorporator if in the hands of a receive	zer, trustee, or other court
appointed fiduciary by that fiduciary)	
Richard A. 1	
(Typed or printed name of person signal	gning)
President	
(Title of person stoping)	

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