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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Ponte Vedra Beach	Chiropractic, Inc.	
DOCUMENT NUMI	BER: P17000059245		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	David Slossberg		
		Name of Contact Person	1
		Firm/ Company	
	301 Casa Devilla Ave.	, ,	
	- · · - · -	Address	· · · · · · · · · · · · · · · · · · ·
	St. Augustine, Florida 32092		
		City/ State and Zip Code	c
	drdsloss@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
David Slossberg		at (788-9029
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ortment of State:
☑ \$35 Filing Fee	☐\$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)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Ponte Vedra Beach Chiropractic, Inc.

(Name	of Corporation as curren	tly filed with the Florida De	pt. of State)
P17000059245			=
_	(Document Number	of Corporation (if known)	SSC 2
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation	adopts the following amendme
A. If amending name, enter the new n	ame of the corporation:		海星
n/a			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation	
B. Enter new principal office address,	if applicable:	n/a	
(Principal office address MUST BE A S			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		n/a	
(Matting address MAT DE AT 031	OTTICE DO.	-	
D. If amending the registered agent ar			ame of the
new registered agent and/or the ne	David Slossberg	<u> </u>	
Name of New Registered Agent	301 Casa Devilla Ave.		
		treet address)	
M	St. Augustine	•	. Florida
New Registered Office Address:		(Ciţı)	(Zip Code)
New Registered Agent's Signature, if o	hunging Registered Ager	ıt·	
I hereby accept the appointment as regis	tered agent. I am familiar	with and accept the obligation	ons of the position.
	Jan &	He Registered Agent, if changing	
	Agnature bDNew	Registered Agent, if changing	

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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)

Example:

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 Doc $\underline{\mathsf{V}}$ X Remove Mike Jones _X Add <u>SV</u> Sally Smith Type of Action <u>Title</u> Name <u>Addres</u>s (Check One) **PVST** David Slossberg 301 Casa Devilla Ave. 1) ____ Change St. Augustine, FL 32092 _ Add __ Remove **PVST** Cliff Hill 805 Cooper Leaf Ct. 2) ____ Change St. Johns, FL 32259 ____ Add Remove ___ Change ____ Add Remove 4) ____ Change _____ Add ___ Remove 5) ____ Change ___ Add Remove 6) ____ Change ____ Add _ Remove

-	ng or adding additional Articles, enter change(s) here: ditional sheets, if necessary). (Be specific)	
see attac	Written Consent of Stockholders.	
·		
		
		
		· · · · · ·
		-
` Ifan	ndment provides for an exchange, reclassification, or cancellation of issued shares.	
prov	is for implementing the amendment if not contained in the amendment itself:	
(ot applicable, indicate N/A)	

The date of each amendment(s) adop	tion:	, if other than t
date this document was signed.		
Effective date if applicable:		
•	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	t does not meet the applicable statutory filing requirement timent of State's records.	s, this date will not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted action was not required.	d by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffic	d by the shareholders. The number of votes east for the ameient for approval.	endinent(s)
	ed by the shareholders through voting groups. <i>The followin</i> h voting group entitled to vote separately on the amendmen	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	<u>,•</u>	
	(voting group)	
selected, by	or, president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, or officery by that fiduciary)	
	(Typed or printed name of person signing)	·
	(Title of person signing)	
	(Title of person signing)	

WRITTEN CONSENT OF STOCKHOLDERS OF PONTE VEDRA BEACH CHIROPRACTIC, INC. A FLORIDA CORPORATION

JUNE 30, 2022

The undersigned, constituting the stockholder(s) holding the requisite number of securities of Ponte Vedra Beach Chiropractic, Inc., a Florida corporation (the "Corporation"), hereby waives any and all requirements for notice of the time and place of an organizational meeting of the Corporation and does hereby agree and consent in writing, without a meeting and in accordance with the Florida Business Corporation Act, as of the 30th day of June 2022, to the adoption of, and does hereby adopt, the following resolutions and the actions specified therein and direct that this written consent (this "Written Consent") be filed with the minutes of the proceedings of the Corporation

WHEREAS, the Corporation was created on July 11, 2017, by the filing of Articles of Incorporation with the Secretary of State of the State of Florida, as appears from the Articles of Incorporation attached hereto as Exhibit A; and

WHEREAS, at the time of the filing of the Articles of Incorporation and the same has remained so through the date hereof. Cliff Hill was appointed to the office of President, Vice President, Secretary and Treasurer, and has and remains the owner of 100% of the Stock of the Corporation; and

WHEREAS, on June 30, 2022, Cliff Hill, as Seller and David Slossberg, as Buyer, entered into that certain Stock Purchase Agreement whereby Cliff Hill would sell and David Slossberg would buy 100% of the Corporation's Stock; and

WHEREAS, the Stockholder(s) have been presented with and have reviewed a draft of the Purchase Agreement and approve same;

NOW, THEREFORE. BE IT RESOLVED, that the Sale and the form, terms and provisions of the Purchase Agreement, in the form substantially submitted to the stockholders, are hereby approved; and be it

FURTHER RESOLVED, that Cliff Hill resigns his offices of President, Vice President, Secretary and Treasurer; and be it

FURTHER RESOLVED, that David Slossberg is appointed and/or elected President, Vice President, Secretary and Treasurer; and he it

FURTHER RESOLVED, that the registered agent of the Corporation be changed to:

David Slossberg 301 Casa Devilla Ave. St. Augustine, Florida 32092 FURTHER RESOLVED, that, this Consent may be executed by facsimile, electronic mail (including pdf or any electronic signature complying with the U.S. federal ESIGN Act of 2000, e.g. docusign.com) or other transmission method shall have the same force and effect as delivery of an original executed counterpart of this Consent.

IN WITNESS WHEREOF, the undersigned, constituting the stockholders of the Company holding the requisite number of securities of the Company necessary to approve the above resolutions, have caused the execution of this Consent, as of the day and year first above written.

STOCKHOLDERS:

Individuals Sign Below:		
Docusigned by. Liff Hill		
Signature		
Cliff Hill		
Name		
Signature (if more than one)*		
Name (if more than one)*		

EXHIBIT A

Electronic Articles of Incorporation For

P17000059245 FILED July 11, 2017 Sec. Of State ndmccleessam

PONTE VEDRA BEACH CHIROPRACTIC, INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:
PONTE VEDRA BEACH CHROPRACTIC, INC.

Article II

The principal place of business address 240 PONTE VEDRA PARK DR #150 PONTE VEDRA, FL. 32082

The mailing address of the corporation is:

240 PONTE VEDRA PARK DR #150 PONTE VEDRA, FL. 32082

Article III

The purpose for which this corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

Article V

The name and Florida street address of the registered agent is:

CLIFF HILL 225 CEZANNE CIRCLE PONTE VEDRA, FL. 32081

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: CLIFF D HILL

P17000059245 FILED July 11, 2017 Sec. Of State ndmccleessam

Article VI

The name and address of the incorporator is.

CLIFF HILL 225 CEZANNE CIRCLE

PONTE VEDRA, FL. 32081

Electronic Signature of Incorporator: CLIFF D HILL.

Lam the incorporator submitting these Articles of incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P CLIFF HILL 225 CEZANNE CIRCLE PONTE VEDRA, FL. 32081

Title: VP CLIFF HILL 223 CEZANNE CIRCLE PONTE VEDRA, FL. 32081

Tute: SEC CLIFF HILL 225 CEZANNE CIRCLE PONTE VEDRA, FL. 32081

Title: T CLIFF HILL 225 CEZANNE CIRCLE PONTE VEDRA, FL. 32081

Article VIII

The effective date for this corporation shall be:

07/10/2017

Electronic Record and Signature Disclosure created on: 1/12/2016 12:01:19 PM Parties agreed to: Cliff Hill

ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

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Required hardware and software

Operating Systems:	Windows2000? or WindowsXP?
Browsers (for SENDERS):	Internet Explorer 6.0? or above
Browsers (for SIGNERS):	Internet Explorer 6.0?, Mozilla FireFox 1.0, NetScape 7.2 (or above)
Email:	Access to a valid email account
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	•Allow per session cookies
	•Users accessing the internet behind a Proxy Server must enable HTTP 1.1 settings via proxy connection

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