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(F	Requestor's Name)	
A)	(ddress)	
(A	(ddress)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
([Ocument Number)	
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Long Chiro Corporations

NAME OF CORPOR	NAME OF CORPORATION: LONG CTITIS COY D		
DOCUMENT NUME	BER:	084314	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Melissa	Cabral -Bar	sottelli
		Name of Contact Persor	1
	- · ·	Firm/ Company	
	119 Hardi	Address FL 32 City/ State and Zip Code	
		Address	
	Edacwo	iter FL, 32	2132
•	- J=	City/ State and Zip Code	2
	malisaa	\ lunnahira	· >~
	E-mail address: (to be us	Unachiro.	notification)
		·	
For further information	concerning this matter, pleas	se call:	
Melissa		at (235-5108
	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	navable to the Florida Dena	urtment of State:
Eliciosed is a circul for	/	payable to the Florida Depe	artificial 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)
	ing Address		Address
	ndment Section		ment Section n of Corporations
Division of Corporations P.O. Box 6327			entre of Tallahassee

Tallahassee, FL 32314

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

Articles of Amendment to Articles of Incorporation of

FILED

	-7071 AHQ-25 AM Q-00
(Name of Corporation as currently	filed with the Florida Dept. of State All 9: 28
	Corporation (if known) A PAR LUBBER EL
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "ce "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	401 Flagler Are
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	New Smyrna Beach, FL 321
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	401 Flagler Are
	New Smyrna Beach FL 3216
•	
•	
D. If amending the registered agent and/or registered office address	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	. Horida
	City) (Zip Code)
Name Danistand America Cinatana if the main Danistand Agents	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar was	ith and accept the obligations of the position.
Signature of Nov. Do.	gistered Agent, if changing
ingrature of New Neg	concrete rigorit, ij cinangring
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c.	o) 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 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	\underline{PT}	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	Melissa Cabral-Barsottell	401 Flagler Arc
Add			New Snyma Brach, FL, 3216
Remove 2) Change		Ignacio Barsotkili	401 Flagher Ave New Smyrna Beach, FL 3211
_X Add			New Smyrna Beach, FL 3211
Remove Change X Add	T	Dring Inganzon	Uew Smyrna Beach, Fl 3:
Remove			
4) Change Add			
Remove			
5) Change			
Add Remove			
6) Change		·	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	 -
	_ .
	-
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	

. . . .

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after	r amendment file date)
Note: If the date inserted in this block does not meet the applicable statut document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of direction was not required.	rectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	Evotes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately.	g groups. The following statement ately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficien	nt for approval
by(voting group)	
(voting group)	
Signature (By a dijector, president or other officer – if dire selected, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	
Melissa Cabrol- (Typed or printed name of pe	Barsottelli irson signing)
President (Title of person signing)	