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TO: Amendment Section

Division of Corporations

| NAME OF CORPORATION: Chiropractic Health Center, Inc. DOCUMENT NUMBER: P98000063389 |
|---|
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Albert Gadonski, D.C. Name of Contact Person Chicopractic Health Center, Inc. Firm/Company 230 Pine Ave N., Suite B Address Oldsmar, FL 34677 City/State and Zip Code drgadonski @ reagan, com J-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Albert Gadomski at (813) 854-1177 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 (Additional copy is enclosed) Certificate of Status Certificate Copy (Additional Copy is enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FI. 323142415 N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation of

| Chiropractic Health Cent | er I n'c 13 5 2:05 |
|--|--|
| (Name of Corporation as currently | filed with the Florida Dept. of State) |
| P98000063389 | |
| (Document Number of | Corporation (if known) |
| Pursuant to the provisions of section $607,1006$, Florida Statutes, this F its Articles of Incorporation: | lorida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| N/A | The new |
| name must be distinguishable and contain the word "corporation," "co "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.," professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | N/A |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | N/A |
| D. If amending the registered agent and/or registered office addresses registered agent and/or the new registered office address: | ess in Florida, enter the name of the |
| Name of New Registered Agent | <u>/ A</u> |
| New Registered Office Address: N/A | et address) Florida City) (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar wi | ith and accept the obligations of the position. |
| N/A | gistered Agent, if changing |
| Signature of New Key | gimeren regent, ij enanging |

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

| Example: X Change | <u>PT</u> | John D | loc | |
|---|--------------|-------------|---|------------------|
| X Remove | <u>V</u> | Mike J | ones | |
| <u>X</u> Add | <u>sv</u> | Sally S | <u>smith</u> | |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | <u>Address</u> |
| 1) Change | <u>V</u> _ | _ | Teresa Carrythers | 230 Pine Ave N., |
| _ <u>X_</u> Add | | | | Svite B |
| Remove | | | | Oldsmar FL 34677 |
| 2) Change | | | | |
| Add | | | | |
| Remove 3) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |
| | | | Page 2 of 4 | |
| E. <u>If amending or addi</u> (Attach additional sho | | | ticles, enter change(s) here: (Be specific) | |

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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued sha provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | |
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| Page 3 of 4 | |
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| The date of and and and and and and and and | it when they a |
| The date of each amendment(s) adoption: | , it other than ir |
| date this document was signed. | |
| Effective date if applicable: $07/01/2020$ | |
| Effective date if applicable: 07/01/2020 | |
| (no more than 90 days after amendment file dat | 'e') |

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

| Adoption of Amendment(s) | (<u>CHECK ONE</u>) |
|--|--|
| ☐ The amendment(s) was/we by the shareholders was/w | e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval. |
| ☐ The amendment(s) was/we must be separately provide | e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s): |
| "The number of vote | cast for the amendment(s) was/were sufficient for approval |
| by | <u> </u> |
| | (voting group) |
| The amendment(s) was/we action was not required. | e adopted by the board of directors without shareholder action and shareholder |
| ☐ The amendment(s) was/we action was not required. | e adopted by the incorporators without shareholder action and shareholder |
| Dated <u>D</u> Signature | 1/01/2020 Mmt Dahma |
| († Se | y a director, president or other officer – if directors or officers have not been leeted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
| | Albert Gadomski, D.C. (Typed or printed name of person signing) |
| | (Title of person signing) |