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(Business Entity Name)
(Document Number)
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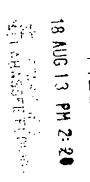




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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: BOYNTON BEAC	CH CHIROPRACTIC CE	NTER, INC.			
DOCUMENT NUMBE	S38256					
	f Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
E	RIC F. HERMANN					
_		Name of Contact Person)			
В	OYNTON BEACH CHIRO	OPRACTIC CENTER IN	C			
BOYNTON BEACH CHIROPRACTIC CENTER, INC.						
Firm/ Company 639 E. OCEAN AVENUE, SUITE 107						
		Address				
8	OYNTON BEACH, FL 33	435				
_		City/ State and Zip Cod	e			
drherm	ı@att.net					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information of ERIC F. HERMANN	concerning this matter, pleas	561	733-8000			
Name of	Contact Person	at (at () de & Daytime Telephone Number			
	the following amount made		•			
S35 Filing Fee	☐S43.75 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)			
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address Innent Section on of Corporations Building xecutive Center Circle ussee, FL 32301			

Articles of Amendment to Articles of Incorporation of

BOYNTON BEACH CHIROPRACTIC CENTER, INC.

(Name of Corporation as currently f	iled with the Florida Dept. of State)
S38256	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fh its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
BOYNTON BEACH CHIROPRACTIC, INC.	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co word "chartered," "professional association," or the abbreviation "P.,	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	≥
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
Van Provintered Office Address	Florida
New Registered Office Address: (C)	, Florida
New Registered Agent's Signature, if changing Registered Agent:	e i sa in e za sa
I hereby accept the appointment as registered agent.—I am familiar with	i and accept the obligations of the position.
Signature of New Rey.	istered Agent, if changing

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	<u> PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	ne <u>s</u>	
X Add	<u>sv</u>	Sally Sn	<u>vith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Address</u>
1) Change		-		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_ _		
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Remove				<u> </u>
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach	additional sh	ing additional eets, if necessa	ry). (Be sp.		mer,			
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[f		anidos for an		.alvanifization		:	ale a man	
provis	sions for imp	ovides for an lementing the	exchange, re amendment	if not contain	ed in the amo	endment itse	<u>Snares.</u> lf:	
(i)	f not applicab	le, indicate N/2	4)					
								
	-							
	_							

The date of each amendment(s) add date this document was signed.	pption:	, if other than the
Effective date <u>if applicable</u> :	·····	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blood document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendmen icient for approval.	at(s)
	oved by the shareholders through voting groups. The following states ach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes east fo	or the amendment(s) was/were sufficient for approval	
by	·	
	(voting group)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
AUGUST 8	2018	
Dated		
Signature	UG A	
selected,	ector, president or other officer – if directors or officers have not bee by an incorporator – if in the hands of a receiver, trustee, or other co d fiduciary by that fiduciary)	
E	RIC F. HERMANN	
_	(Typed or printed name of person signing)	
F	PRESIDENT	

(Title of person signing)