

STATE OF ALABAMA

DOMESTIC BUSINESS CORPORATION  
CERTIFICATE OF FORMATION

20150721000248100 1/4 \$158.00  
Shelby Cnty Judge of Probate, AL  
07/21/2015 04:06:11 PM FILED/CERT

**PURPOSE:** In order to form a Business Corporation (formerly known as For-Profit Corporation) under Section 10A-1-3.05 and 10A-2-2.02 of the Code of Alabama 1975 this Certificate Of Formation and the appropriate filing fees must be filed with the Office of the Judge of Probate in the county where the corporation's initial registered office is located. **The information required in this form is required by Title 10A.**

**INSTRUCTIONS:** Mail one (1) signed original and two (2) copies of this completed form and the appropriate filing fees to the Office of the Judge of Probate in the county where the corporation's registered office is/will be located. Contact the Judge of Probate's Office to determine the county filing fees. **Make a separate check or money order payable to the Secretary of State for the state filing fee of \$100.00** and the Judge of Probate's Office will transmit the fee along with a certified copy of the Certificate to the Office of the Secretary of State within 10 days after the Certificate is issued. Once the Secretary of State's Office has indexed the filing the information will appear at [www.sos.alabama.gov](http://www.sos.alabama.gov) under the Government Records tab and the Business Entity Records link – you may search by entity name. Your notification of filing was provided by the Probate Judge's Office via a stamped copy and the Secretary of State's Office does not send out a copy. You may pay the Secretary of State fees by credit card if the county you are filing in will accept that method of payment (see attached). Your corporation will not be indexed if the credit card does not authorize and will be removed from the index if the check is dishonored.

(For County Probate Office Use Only)

**This form must be typed or laser printed.**

1. The name of the corporation (must contain the word "corporation" or "incorporated," or the abbreviation of one of those words, and comply with Code of Alabama Title 10A-1-5.04):

Hometown Chiropractic, LLC

2. **A copy of the Name Reservation certificate from the Office of the Secretary of State must be attached.**

(For SOS Office Use Only)

This form was prepared by: (type name and full address)

David A. Stull D.C.  
1516 Maddox Lane  
Monroe, Ga 30656

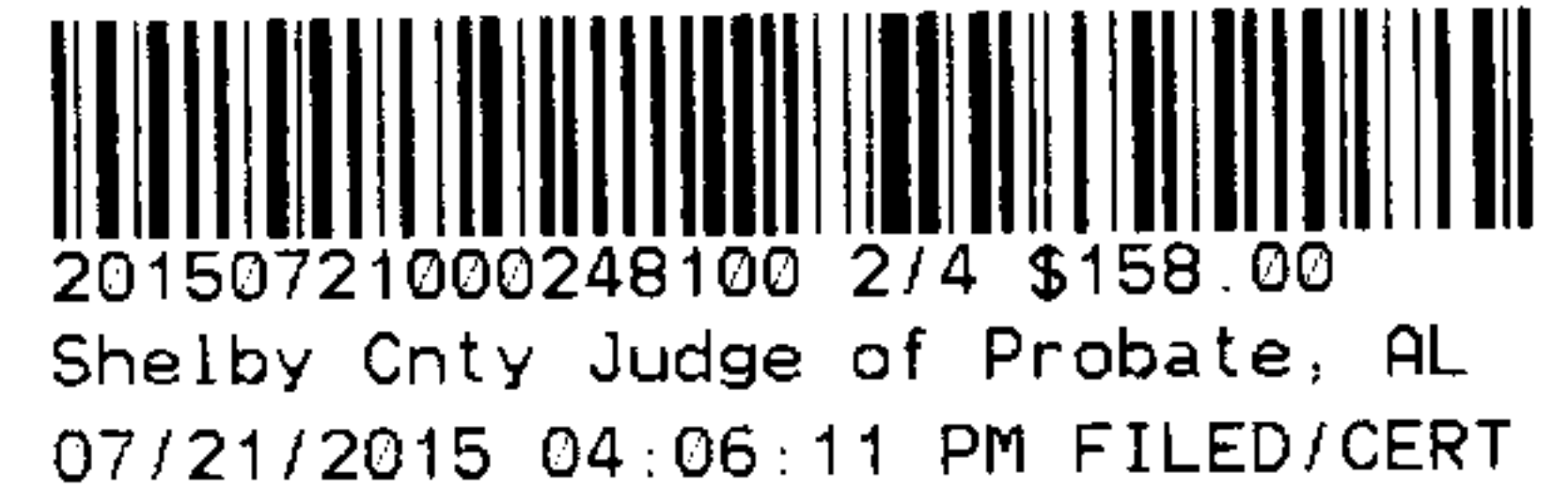
DOMESTIC BUSINESS CORPORATION CERTIFICATE OF FORMATION

3. Street (**No PO Boxes**) address of principal office of the corporation: 204 East College Street  
Columbiana, AL 35051

Mailing address of principal office (if different from street address): P.O. Box 215  
Columbiana, AL 35051

4. The name of the Registered Agent: Dr. David A. Stull

Street (**No PO Boxes**) address of Registered Agent: 1516 Maddox Lane  
Monroe, Ga 30656



Mailing address of Registered Agent (if different from street address): \_\_\_\_\_

5. Purpose for which corporation is formed: Chiropractic Services

\_\_\_\_\_ ; the  
purpose includes the transaction of any lawful business for which corporations may be incorporated in  
Alabama under Title 10A, Chapter 2 of the Code of Alabama.

6. Number of Shares the corporation is authorized to issue: 1 Par Value \_\_\_\_\_  
(Par value is optional information and does not have to be completed.)

7. Period of duration shall be perpetual unless stated otherwise by an attached exhibit.

8. The name(s) of the Incorporator(s): Dr. David A. Stull

Street (**No PO Boxes**) address of Incorporator(s): 1516 Maddox Lane

Monroe, Ga 30656 Mailing address of Incorporator(s) – (if

different from street address): \_\_\_\_\_

**Attach a listing if more Incorporators need to be added.**

9. Director's Name: Dr. David A. Stull

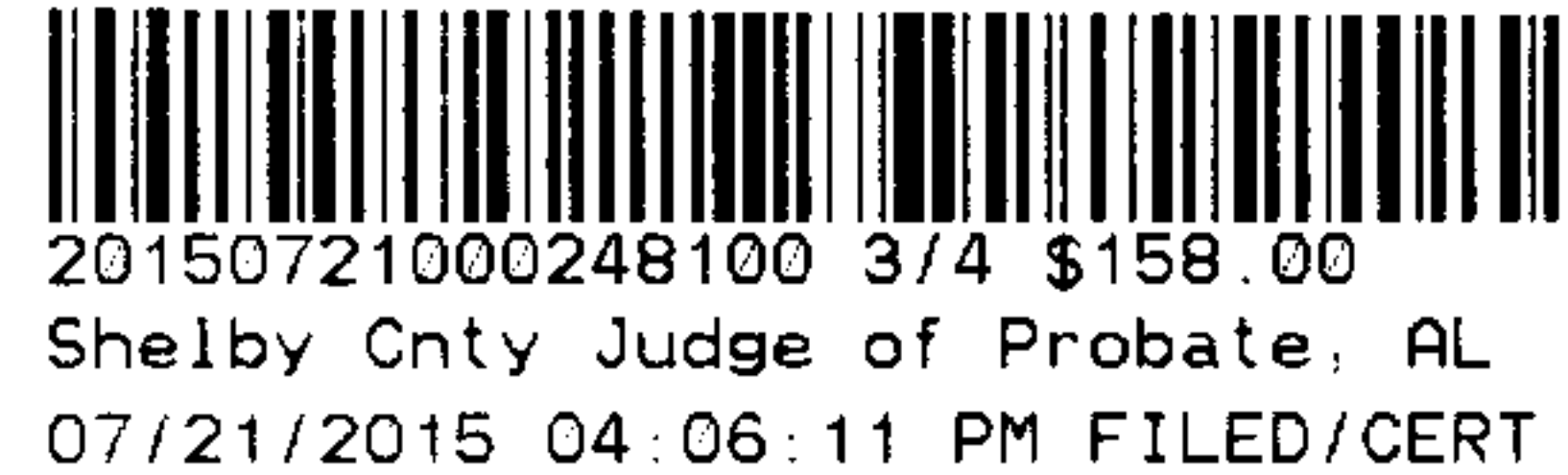
Street (**No PO Boxes**) address of Director: 1516 Maddox Lane

Monroe, Ga 30656 Mailing address of Director(s) - (if different

from street address): \_\_\_\_\_



DOMESTIC BUSINESS CORPORATION CERTIFICATE OF FORMATION



Director's Name: \_\_\_\_\_

Street (**No PO Boxes**) address of Director: \_\_\_\_\_

\_\_\_\_\_ Mailing address of Director(s) - (if different from street address): \_\_\_\_\_

Director's Name: \_\_\_\_\_

Street (**No PO Boxes**) address of Director: \_\_\_\_\_

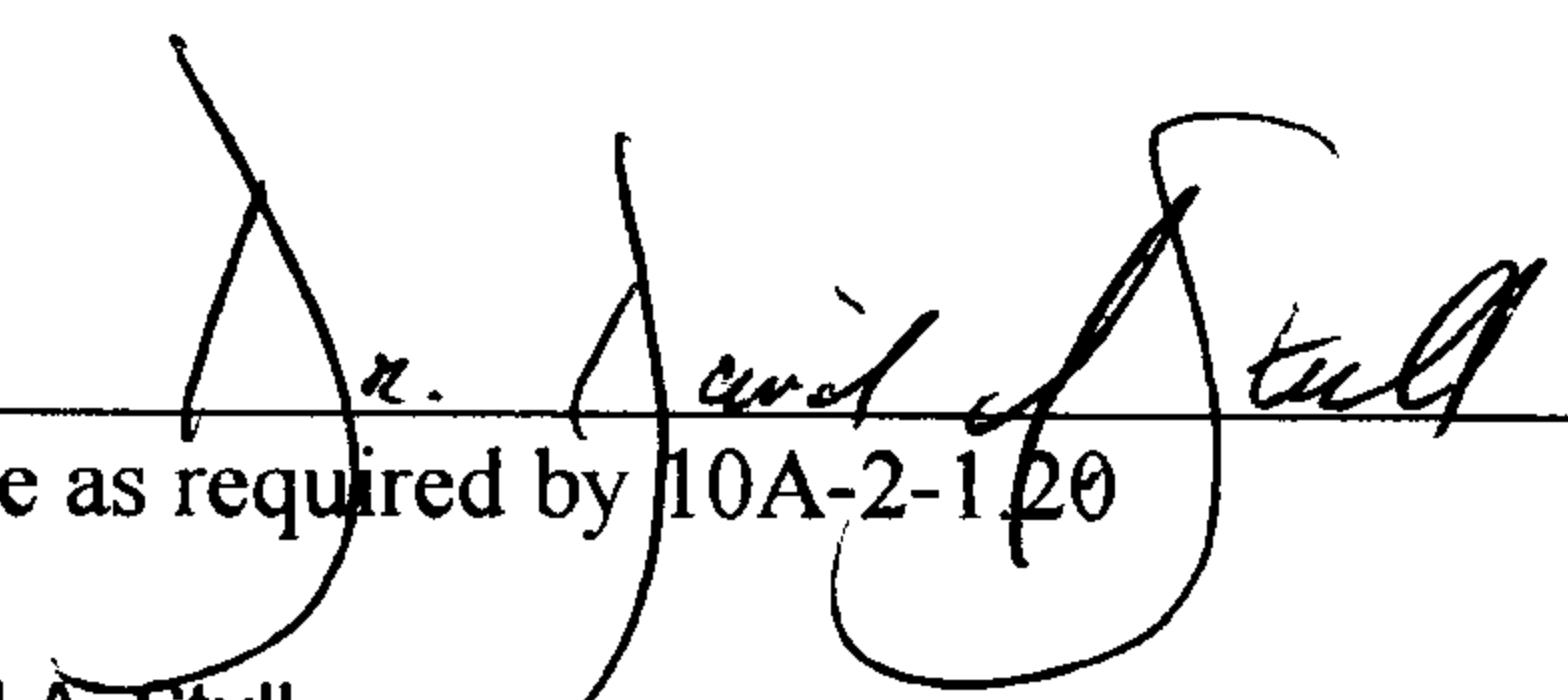
\_\_\_\_\_ Mailing address of Director(s) - (if different from street address): \_\_\_\_\_

**Attach listing if more Directors need to be added.**

10. A director has no liability to the corporation or its shareholders for money damages for any action taken, or any failure to take any action, as a director, except liability for (A) the amount of financial benefit received by a director to which he or she is not entitled; (B) an intentional infliction of harm on the corporation or the shareholders; (C) a violation of Section 10A-2-8.33; (D) an intentional violation of criminal law; or (E) a breach of the director's duty of loyalty to the corporation or its shareholders.

☐ Attached are any other provisions that are not inconsistent with law relating to organization, ownership, governance, business, or affairs of the corporation.

07 / 21 / 2015  
Date (MM/DD/YYYY)

  
Signature as required by 10A-2-1.20  
Dr. David A. Stull  
Typed Name of Above Signature

Chiropractor  
Typed Title/Capacity to Sign under 10A-2-1.20

John H. Merrill  
Secretary of State

20150721000248100 4/4 \$158.00  
Shelby Cnty Judge of Probate, AL  
07/21/2015 04:06:11 PM FILED/CERT

P.O. Box 5616  
Montgomery, AL 36103-5616

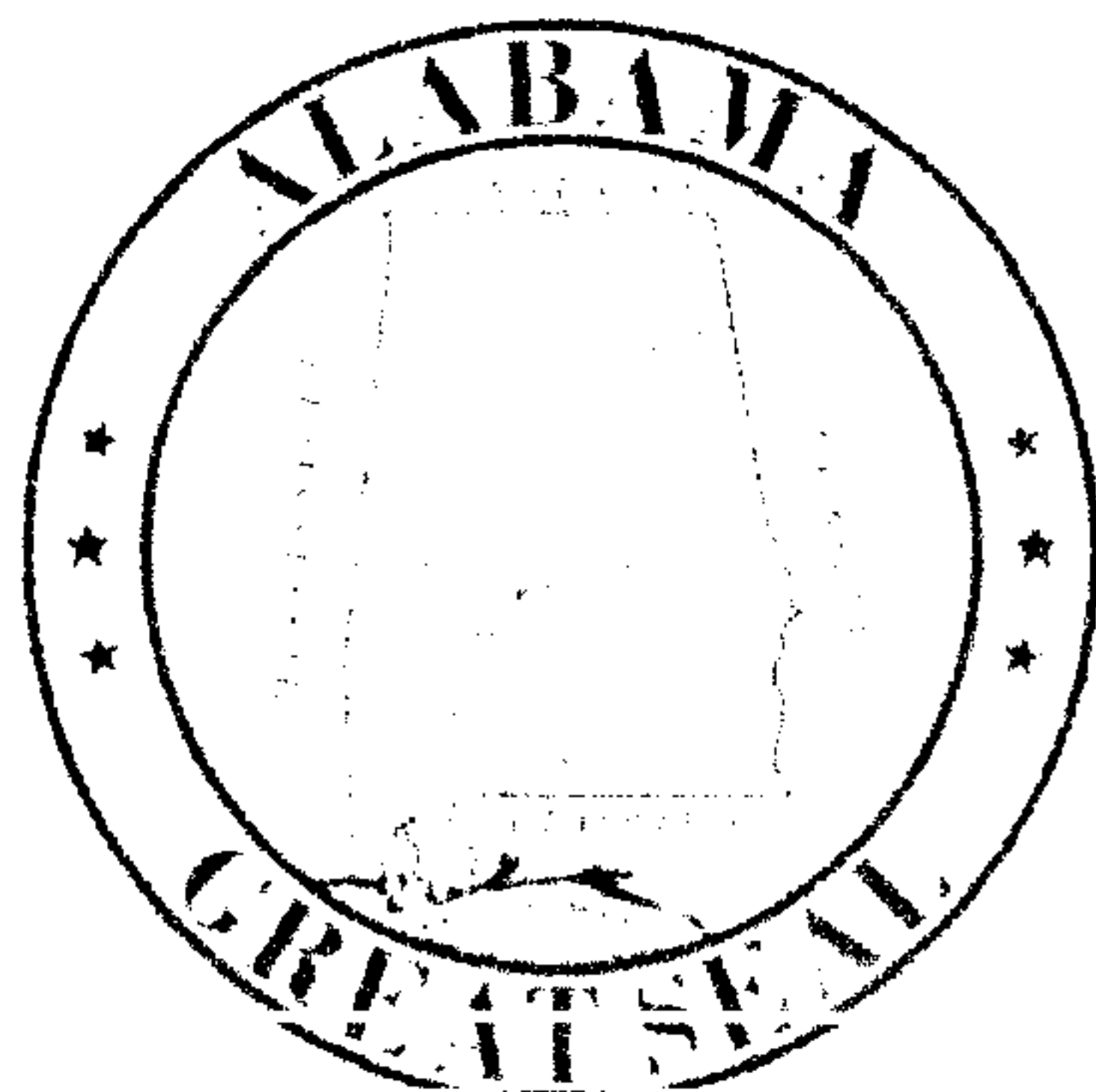
# STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the  
Great and Principal Seal of said State, do hereby certify that**

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama  
1975, and upon an examination of the entity records on file in this office, the  
following entity name is reserved as available:

**Hometown Chiropractic, LLC**

This name reservation is for the exclusive use of David Stull, 1516 Maddox Lane,  
Monroe, GA 30656 for a period of one year beginning July 21, 2015 and expiring  
July 21, 2016



RES695959

**In Testimony Whereof, I have hereunto set my  
hand and affixed the Great Seal of the State, at the  
Capitol, in the city of Montgomery, on this day.**

July 21, 2015

Date

A handwritten signature in black ink that reads "J. H. Merrill". The signature is written in a cursive, flowing style.

John H. Merrill

Secretary of State