

VIOLATION NOTICE

State of Missouri
In the Circuit Court of Boone County
Municipal Division, City of Columbia
600 E. Broadway
Columbia Missouri, 65201

Within the aforesaid City and State:

I, knowing that false statements on this form are punishable by law, state that I have probable cause to believe that:

Defendant Name: Maxwell Family Chiropractic

Address: 2503 Bernadette Drive, Columbia, MO 65203

Phone: 573-443-6828 Email address: _____

On or about (date): Monday, July 20, 2020 Time: 3:45 p.m.

Did then and there commit the following offense and the facts supporting this belief are as follows:

The City of Columbia received a citizen complaint about this business on July 16, 2020. The complaint is attached. I called the business on July 17, 2020 at approximately 10:00 a.m. and made the following notes:

LEIGH CALLED AND SPOKE TO CLARICE WHO SAID SHE WOULD PASS ALONG MY MESSAGE TO THE OWNER. I ASKED HER IF SHE WAS PROVIDED A MASK AND IF STAFF WERE WEARING MASKS. SHE WOULD NOT ANSWER AND SAID SHE WOULD PASS THIS ALONG TO THE OWNER TO HANDLE.

No return call was received from the business.

I visited the business on Monday, July 20 at 3:45 p.m. and made the following notes:

No return call from Maxwell was made. I visited the business at approximately 4:45 p.m. on Monday, July 20. The business door was marked to only ask those with appointments to enter. There was no signage asking customers to wear masks upon entering. I could see three customers - two not wearing masks and one wearing a mask. I could see two employees working at the front desk not wearing masks. I did not enter the business as I fear that would be considered trespass.

That these facts herein are true and constitute a violation of Emergency Ordinance 024284, Section ____ of the Columbia Code of Ordinances and punishable under Ordinance 024284 Section 9 of the Columbia Code of Ordinances.

Enforcement Officer Signature: _____



Enforcement Officer Name (printed): Leigh Kottwitz



Leigh Kottwitz <leigh.kottwitz@como.gov>

Incident Management - Incident 492796 - COVID 19 Code Violations

1 message

City of Columbia <noreply@gocolumbiamo.com>

Fri, Jul 17, 2020 at 9:48 AM

To: City of Columbia <cc_codereports@como.gov>

New Incident: Contact Center - Action/COVID 19 Code Violations

The following incident was created on 7/17/2020 9:48:37 AM by Tunde Adeyemi.

Please refer to incident 492796 when inquiring about this incident.

Priority: 1 - High

Assignee: COVID19 Codes

Incident Details:

A concerned citizen reported on 7/16/20, that both employees and clients at Maxwell Family Chiropractic, were not were wearing masks.

Other Details: [No other details]**Location:**

2503 BERNADETTE Dr
Columbia, MO 65203

Reported by: [Unknown]**Tasks assigned to COVID19 Codes:**

- Incident Complete - Due: 7/17/2020 - Status: Pending

You received this message because you are subscribed to the Google Groups "Covid-19 Code Reports" group.

To unsubscribe from this group and stop receiving emails from it, send an email to cc_codereports+unsubscribe@como.gov.

To post to this group, send email to cc_codereports@como.gov.

To view this discussion on the web visit https://groups.google.com/a/como.gov/d/msgid/cc_codereports/5f11ba45.1c69fb81.f5cc3.a217SMTPIN_ADDED_MISSING%40mx.google.com.

2503

Maxwell Family
We are sorry to hear that you
are in
Appointments
We have called to order
supplies for you
If you wish meet the above,
please contact us before entering
our office
773-643-8228

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State of Missouri

John R. Ashcroft, Secretary of State
Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

X001382163
Date Filed: 1/8/2020
Expiration Date: 1/8/2025
John R. Ashcroft
Missouri Secretary of State

Registration of Fictitious Name

(Submit with filing fee of \$7.00)

(Must be typed or printed)

This information is for the use of the public and gives no protection to the name being registered. There is no provision in this Chapter to keep another person or business entity from adopting and using the same name. The fictitious name registration expires 5 years from the filing date. (Chapter 417, RSMo)

Please check one box:

☒ New Registration ☐ Renewal Charter number ☐ Amendment Charter number ☐ Correction Charter number

The undersigned is doing business under the following name and at the following address:

Business name to be registered: Maxwell Family Chiropractic

Business Address: 2503 Bernadette Dr

(PO Box may only be used in addition to a physical street address)

City, State and Zip Code: Columbia, MO 65203

Owner Information:

If a business entity is an owner, indicate business name and percentage owned. If all parties are jointly and severally liable, percentage of ownership need not be listed. Please attach a separate page for more than three owners. The parties having an interest in the business, and the percentage they own are:

Name of Owners, Individual or Business Entity	Charter # Required If Business Entity	Street and Number	City and State	Zip Code	If Listed, Percentage of Ownership Must Equal 100%
Wellness Way Columbia LLC	LC001683567	2412 Forum Blvd Suite 101	Columbia, MO	65203	100.00

All owners must affirm by signing below

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties of a false declaration under Section 575.060 RSMo)

Wellness Way Columbia LLC - Jeremy Maxwell	WELLNESS WAY COLUMBIA LLC - JEREMY MAXWELL	01/08/2020
<i>Owner's Signature or Authorized Signature of Business Entity</i>	<i>Printed Name</i>	<i>Date</i>

Name and address to return filed document:

Name: Nathan A Jones

Address: Email: nathan@nathanjoneslaw.com

City, State, and Zip Code: _____



State of Missouri

John R. Ashcroft, Secretary of State

Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

LC001683567
Date Filed: 1/7/2020
John R. Ashcroft
Missouri Secretary of State

Articles of Organization

(Submit with filing fee of \$105.00)

1. The name of the limited liability company is

Wellness Way Columbia LLC

(Must include "Limited Liability Company," "Limited Company," "LC," "L.C.," "LLC," or "LLC")

2. The purpose(s) for which the limited liability company is organized:

The transaction of any and all lawful business for which a Limited Liability Company may be organized in the State of Missouri.

3. The name and address of the limited liability company's registered agent in Missouri is:

Nathan A Jones 2412 Forum Blvd Suite 101 Columbia MO 65203

Name

Street Address: May not use PO Box unless street address also provided

City/State/Zip

4. The management of the limited liability company is vested in: ☒ managers ☐ members (check one)

5. The events, if any, on which the limited liability company is to dissolve or the number of years the limited liability company is to continue, which may be any number or perpetual: Perpetual

(The answer to this question could cause possible tax consequences, you may wish to consult with your attorney or accountant)

6. The name(s) and street address(es) of each organizer (PO box may only be used in addition to a physical street address):

(Organizer(s) are not required to be member(s), manager(s) or owner(s))

Name

Address

City/State/Zip

Jones, Nathan A

2412 Forum Blvd, Suite 101

Columbia MO 65203

7. ☐ Series LLC (OPTIONAL) Pursuant to Section 347.186, the limited liability company may establish a designated series in its operating agreement. The names of the series must include the full name of the limited liability company and are the following:

New Series:

☐ The limited liability company gives notice that the series has limited liability.

New Series:

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New Series:

☐ The limited liability company gives notice that the series has limited liability.

(Each separate series must also file an Attachment Form LLC 1A.)

Name and address to return filed document:

Name: Nathan A Jones

Address: Email: nathan@nathanjoneslaw.com

City, State, and Zip Code:

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CERTIFICATE OF ORGANIZATION

WHEREAS,

Wellness Way Columbia LLC
LC001683567

filed its Articles of Organization with this office on the 7th day of January, 2020, and that filing was found to conform to the Missouri Limited Liability Company Act.

NOW, THEREFORE, I, John R. Ashcroft, Secretary of State of the State of Missouri, do by virtue of the authority vested in me by law, do certify and declare that on the 7th day of January, 2020, the above entity is a Limited Liability Company, organized in this state and entitled to any rights granted to Limited Liability Companies.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri.
Done at the City of Jefferson, this 7th day of January, 2020.


Secretary of State

