

N050000006403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

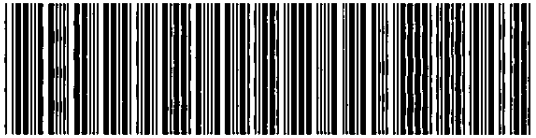
(Business Entity Name)

(Document Number)

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FILED
09 APR 14 PM 4:09
SECRETARY OF STATE
TALLAHASSEE FLORIDA

T. Roberts APR 14 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 1, 2009

TERESA K. REILLY
ADAPT ETTIQUETTE, INC.
7143 SR 54 #215
NEW PORT RICHEY, FL 34655

SUBJECT: ADAPT ETIQUETTE, INC.
Ref. Number: N05000006403

We have received your document for ADAPT ETIQUETTE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 809A00011010

April 8, 2009

Florida Dept. of State, Division of Corporations
PO Box 6327
Tallahassee, FL 32314

To: Tina Roberts, Regulatory Specialist II

Re: ADAPT ETIQUETTE, INC.
Ref Number: N05000006403

Dear Tina,

Thank you for your letter dated April 1, 2009. Per your instructions, I have corrected the Articles of Amendment referenced above by adding a required corporate suffix to the new corporate name, ETIQUETTE LESSONS FOUNDATION, INC. Please proceed to file the enclosed document.

Thank you for your attention to this matter.

Sincerely,



Teresa Reilly

PS: Please note, this is the correct spelling of the word: ETIQUETTE and the correct zip code for the mailing address is: 34653

Adapt Etiquette, Inc.
7143 SR 54, #215
New Port Richey, FL 34653

RECEIVED
2009 APR 14 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ADAPT ETIQUETTE, INC.

DOCUMENT NUMBER: N05 000006403

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Teresa K Reilly

(Name of Contact Person)

ADAPT ETIQUETTE, INC.

(Firm/ Company)

7143 SR 54 #215

(Address)

New Port Richey, FL 34655

(City/ State and Zip Code)

For further information concerning this matter, please call:

Teresa K Reilly

(Name of Contact Person)

at (877) 847-2748

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

EFFEKTIVE DATE
6-1-89

Articles of Amendment
to
Articles of Incorporation
of

ADAPT ETIQUETTE, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N05000006403

(Document Number of Corporation (if known))

FILED
09 APR 14 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

ETIQUETTE LESSONS FOUNDATION, INC.

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Amend / Change of name of Corporation

The date of each amendment(s) adoption: 31 17/09

Effective date if applicable: 6/01/09
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 3/17/2009

Signature Teresa K Reilly

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Teresa K Reilly
(Typed or printed name of person signing)

Director
(Title of person signing)