N100000010659

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TALLAHASSEE FLORIDA

Amend
Name
6-23-11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Adaptive Technology Solutions Inc

DOCUMENT NUMBER: N10000010659

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

Please return all correspondence concerning this matter to the following:

Sandi Baker
(Name of Contact Person)

Adaptive Technology Solutions
(Firm/ Company)

119 S. Palmetto Ave Suite 173
(Address)

Daytona Beach, FL 32114
(City/ State and Zip Code)

adaptivesol@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandi Baker at (386) 334-7698
(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:

☐ $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)

RECEIVED
11 JUN 21 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 13, 2011

SANDI BAKER
ADAPTIVE TECHNOLOGY SOLUTIONS INC.
119 S. PALMETTO AVE., SUITE 173
DAYTONA BEACH, FL 32114

SUBJECT: ADAPTIVE TECHNOLOGY SOLUTIONS INC.
Ref. Number: N10000010659

We have received your document for ADAPTIVE TECHNOLOGY SOLUTIONS INC. and check(s) totaling $43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 311A00014400

Articles of Amendment
to
Articles of Incorporation
of

FILED
11 JUN 21 AM 10:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Adaptive Technology Solutions Inc.

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

N10000010659

(Document Number of Corporation (if known)

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:

_____

*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)*

_____, Florida_____
(City) *(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)

Title	Name	Address	Type of Action
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Additional verbage is being given than what was entered online. Please see attached.

See attached

Adaptive Technology Solutions Inc.

Adaptive Technology Solutions Inc is organized exclusively for scientific and educational purposes, including the making of distributions to organizations that qualify as exempt organizations under section 501 (c) (3) of the Internal Revenue Code or corresponding section of any future tax code.

Article N:

In the event of dissolution of the foundation the assets will be divides as follows:

In the event of the dissolution for any reason, all assets remaining after all liabilities have been met shall be distributed to the Epilepsy Foundation who is exempt from taxation under the Internal Revenue Code and Regulations there under as selected by the majority of the remaining members of the Board of Directors within compliance of F.S. 617.1406. "However, if the named recipient is not in existence or no longer a qualified distribute, or unwilling or unable to accept the distribution, then the assets of this organization shall be distributed to a fund, foundation, or organization that is organized and operated exclusively for the purposes specified in section 501 (c) (3) of the Internal Revenue Code"

Effective Date: 11/15/2010

The date of each amendment(s) adoption: June 19, 2011 Originally done on 11/15/10 on paper
(date of adoption is required)

Effective date if applicable: 6/20/11
(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 6/20/11

Signature _____

(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)

Sandi Butler
(Typed or printed name of person signing)

Executive Director
(Title of person signing)