

From:

02/17/2006 12:20 #103 P.001/004

Division of Corporations

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**F03000005085**

Florida Department of State  
Division of Corporations  
Public Access System

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To:

Division of Corporations  
Fax Number : (850) 205-0380

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.  
Account Number : I20000000088  
Phone : (800) 221-0102  
Fax Number : (212) 564-6083

**COR AMND/RESTATE/CORRECT OR O/D RESIGN**

**NATIONAL ALLIANCE FOR AUTISM RESEARCH, INC.**

Certificate of Status	0
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DIVISION OF CORPORATIONS

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From:

02/17/2006 12:21 #103 P.002/004

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**NOT FOR PROFIT CORPORATION  
APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION TO FILE  
AMENDMENT TO APPLICATION FOR CONDUCTING AFFAIRS IN FLORIDA**  
(Pursuant to s. 617.1504, F.S.)

**SECTION I  
(1-3 MUST BE COMPLETED)**

**F03000005085**

(Document Number of Corporation (If known))

1. **National Alliance for Autism Research, Inc.**

(Name of corporation as it appears on the records of the Department of State)

2. **New Jersey**

(Incorporated under laws of)

3. **October 6, 2003**

(Date authorized to conduct affairs in Florida)

**SECTION II**

**(4-8 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? **January 31, 2006**

5. **The Autism Speaks Foundation Inc.**

(Name of corporation after the amendment, adding suffix "corporation," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation. "Company," or "Co.," may not be used as a corporate suffix by a nonprofit corporation)

6. If the amendment changes the period of duration, indicate new period of duration and the date the change was effected.

(New duration)

(Date)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction and the date the change was effected.

(New jurisdiction)

(Date)

8. If the purpose which the corporation intends to pursue in Florida has changed, indicate new purpose.

(The corporation is authorized to pursue such purpose in the jurisdiction of its incorporation)

(Signature of the chairman or vice chairman of the board, president, or other officer - if in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary)

**Mark Roithmayr**

(Typed or printed name of the person signing)

**President**

(Title of person signing)

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STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

THE AUTISM SPEAKS FOUNDATION INC.  
0100594197

*With the Previous or Alternate Name*

NATIONAL ALLIANCE FOR AUTISM RESEARCH (Alternate  
Name)

NATIONAL ALLIANCE FOR AUTISM RESEARCH, INC.  
(Previous Name)

NATIONAL ALLIANCE FOR AUTISM RESEARCH; NAAR  
(Alternate Name)

*I, the Treasurer of the State of New Jersey, do  
hereby certify that the above-named  
New Jersey Non Profit Corporation was  
registered by this office on July 14, 1994.*

*As of the date of this certificate, said business  
continues as an active business in good standing  
in the State of New Jersey, and its Annual Reports  
are current.*

*I further certify that the registered agent and  
registered office are:*

Glenn R. Tringali  
99 Wall Street, Research Park  
Princeton, NJ 08540

*Continued on next page . . .*

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From:

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STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

THE AUTISM SPEAKS FOUNDATION INC.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
9th day of February, 2006

*Bradley I. Abelow*

Bradley I. Abelow  
Acting State Treasurer

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