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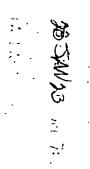
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JAN 24 2020 S. YOUNG



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 14, 2020

RECEIVED
JAN 2 2 2020

ELLIE DOWNS 3780 WILSHIRE BLVD STE 800 LOS ANGELES, CA 90010

SUBJECT: LOS ANGELES ALZHEIMERS ALLIANCE CORPORATION

Ref. Number: F19000001296

We have received your document for LOS ANGELES ALZHEIMERS ALLIANCE CORPORATION and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA, but your entity is a FOREIGN. Please complete and return the enclosed blank form(s).

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 820A00001034

## Rutledge | Ecenia

119 South Monroe Street, Suite 202 Tallahassee, FL 32301

> PO Box 551 Tallahassee, FL 32302

## Via Hand Delivery MEMORANDUM

TO:

Florida Department of State

Division of Corporations
The Centre of Tallahassee

2415 North Monroe Street, Suite 810

Tallahassee, FL 32303

FROM:

Maggie M. Schultz

DATE:

January 23, 2020

RE

Re-Filing of Application by Foreign Not for Profit Corporation to file

Amendment / Los Angeles Alzheimers Alliance Corporation /

F19000001296

Regarding the letter dated January 14, 2020, enclosed please find the correct forms and documentation for the Amendment Application for Los Angeles Alzheimers Alliance Corporation (Document Number: F19000001296). A copy of the January 14<sup>th</sup> Letter is also enclosed for reference.

Thank you for your assistance. Please call us at 681-6788 to pick up the filing confirmations when it is ready.

#### **COVER LETTER**

P.O. Box 6327

Tallahassee, FL 32314

TO: Amendment Section Division of Corporations			
SUBJECT: LOS Angeles Alzhe	imers Allians	ce	
DOCUMENT NUMBER: F1900000	1296		
The enclosed Amendment and fee are submitted	d for filing.		
Please return all correspondence concerning thi	s matter to the following	4:	
Kristie Ralph Name of Contact Person			
DLS Events LLC Firm/Company			
3780 Wilshire Blud S	<u>ite 800</u>		
Los Angeles (A 900 City/State and Zip Code	10		
E-mail address: (to be used for future annual re	sllc.com		
For further information concerning this matter,	please call:		
Kristie Ralph at	(213) 819 Area Code & Daytime T	- 0492 elephone Number	
Enclosed is a check for the following amount:			
LI \$35.00 Filing Fee & Certificate of Status  Already Paid	UIS43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	1 1852,50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
Mailing Address:	Street Address:		
Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

# 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 1 (1-3 MUST BE COMPLETED)

F1900001296	
1 1 or Magales Al-heimars Alliance	
1. Los Angeles Alzheimers Alliance (Name of corporation as it appears on the records of the Department of State)	<del></del>
2. California 3. 3.15.209 (Incorporated under laws of) (Date authorized to conduct affa	irs 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 jurisdiction of incorporation? $1 \cdot 2 \cdot 209$	I under the laws of its
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this da	ne will not be listed as the
document's effective date on the Department of State's records.	
5. Alzheimers Alliance of America (Name of corporation after the amendment, adding suffix "corporation," or "incorporated," or appropriate a if not contained in new name of the corporation. "Company," or "Co.," may not be used as a corporate suf corporation)	abbreviation. Tax by a nonprofit
6. If the amendment changes the period of duration, indicate new period of duration and the effected.	date the change was
(New duration) (Date)	
7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction a was effected.	nd the date the change
(New jurisdiction) (Date)	
8. If the purpose which the corporation intends to pursue in Florida has changed, indicate no	ew purpose.
	- July
(The corporation is authorized to pursue such purpose in the jurisdiction of its incorporation)	ion) – . <del>S</del>
. Attached is a certificate or document of similar import, evidencing the amendment, authors 90 days prior to delivery of the application to the Department of State, by the Secretary of having custody of corporate records by the jurisdiction under the laws of which it is incoming custody of corporate records by the jurisdiction under the laws of which it is incoming to the laws of the la	inticated no thore than of State or offer officia rporated.
(Signature of the chairman of the board, president, or other officer	- 기 <u>왕</u>
if in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary)	· · · · <del>· ·</del>
(Typed or printed name of the person signing)  (Title of person signing)	· ·

#### State of California

### Secretary of State

CERTIFICATE OF STATUS

#### ENTITY NAME:

ALZHEIMERS ALLIANCE OF AMERICA

FILE NUMBER:

C3810903

FORMATION DATE:

07/27/2015

TYPE:

DOMESTIC NONPROFIT CORPORATION

JURISDICTION: CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 21, 2019.

ALEX PADILLA Secretary of State



# Secretary of State Certificate of Amendment of Articles of Incorporation Name Change Only - Nonprofit

AMDT-NP-NA

Item 3a: Enter the number, letter, or other designation assigned to the provision in the

A0836193

FILED Secretary of State
State of California
NOV 2 1 2019 (NAT)

IMPORTANT - Read Instructions before completing this form.

Filing Fee - \$30.00

Copy Fees – First Page \$1.00 & .50 for each attachment page; Certification Fee – \$5.00

 Corporation Name (Enter the exact name of the corporation as it is currently recorded with the California Secretary of State) This Space For Office Use

2. 7-Digit Secretary of State File I

LOS ANGELES ALZHEIMERS ALLIANCE

03810903

3. N	ew Corporation Name	Incorporation being amended (e.g., "I," "First," or "A"). See Instructions if the pro- Articles of Incorporation being amended does not include a number, letti- designation. Any attachment is made part of this document.
•	Item 3b:	Enter the new corporate name.
32	a. Article1 of the Article	s of Incorporation is amended to read as shown in Item 3b below:
3t	o. The name of the corporation is $A$	LZHEIMERS ALLIANCE of AMERICA
4. A	pproval Statements	
4a	a. The Board of Directors has approve	ved the amendment of the Articles of Incorporation.
41	o. Member approval was (check one	a):
	By the required vote of the m	embers in accordance with California Corporations Code section 58

5. Read, sign and date below (See instructions for signature requirements. Note: Both lines must be

We declare under penalty of perjury under the laws of the State of California that the matters set forth herei and correct of our own knowledge and we are authorized by California law to sign.

9/24/19 Date

Signature Signature

Not required because the corporation has no members.

Type or Print Name of Preside

9/2-Y/\4 Date

Signature

Type or Print Name of Secreta