

NO1 000000385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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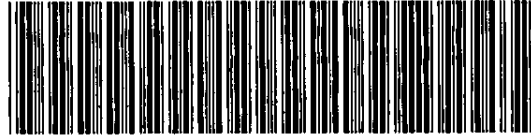
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 10 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ACCESS FOR THE DISABLED, INC.

DOCUMENT NUMBER: N01000000385

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

Please return all correspondence concerning this matter to the following:

PATRICIA L. KENNEDY

(Name of Contact Person)

ACCESS FOR THE DISABLED, INC.

(Firm/ Company)

9205 NW 80th STREET

(Address)

TAMARAC, FL 33321-1404

(City/ State and Zip Code)

musickennedy@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patricia Kennedy

954

724-0695

at

(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:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Articles of Amendment
to
Articles of Incorporation
of

ACCESS FOR THE DISABLED, INC.

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

ACCESS FOR THE DISABLED, INC.

(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:

n/a

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)

9205 NW 80TH STREET

TAMARAC, FL 33321-1404

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9205 NW 80TH STREET

TAMARAC, FL 33321-1404

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:

PATRICIA L. KENNEDY

9205 NW 80TH STREET

(Florida street address)

New Registered Office Address:

TAMARAC

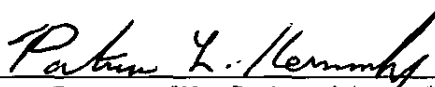
(City)

Florida 33321-1404

(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

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TALLAHASSEE FLORIDA

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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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Robert Cohen-Deceased</u>	<u>9205 NW 80th Street</u> <u>Tamarac, FL 33321-1404</u> <u>(Founding member)</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PTD</u>	<u>Patricia L. Kennedy</u>	<u>9205 NW 80th Street</u> <u>Tamarac, FL 33321-1404</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Dennis Haynes</u>	<u>9205 NW 80th Street</u> <u>Tamarac, FL 33321-1404</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Sari Fields</u>	<u>9205 NW 80th Street</u> <u>Tamarac, FL 33321-1404</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Barbara Haley</u>	<u>9205 NW 80th Street</u> <u>Tamarac, FL 33321-1404</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u> <u></u> <u></u>

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

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

ARTICLE VIII-DISSOLUTION

(amending)

In the event of dissolution, the residual assets of the organization, after payment of debts, will be turned over to one or more organizations which themselves are exempt as organizations described in Section 501 (C) (3) and 170 (C) (2) of the Internal Revenue Code of 1986 or corresponding sections of any prior or future law, or to the Federal, State, or Local Government for exclusive public purpose. Assets distributed among agencies with similar, or like missions serving people with disabilities.

ARTICLE X-DERESTRICTION OF SERVICE

(adding)

The above organization intends to serve all persons who fall within the aforementioned Mission Statement in the Articles of Incorporation, in an all-inclusive, non-prejudices manner; exclusive only of those who don't fall within the guidelines of said Articles of Incorporation, or who cause harm or have proven to be athreat to others and / or the organization. Srevices rendered by the organization shall be established by the organization, at state level (Florida) or national level in United States of America, and or international level assisting when opportunities arise to help address the needs resulting from natural disasters, global emergencies and / or environonmental health issues; and said organization, as well as those involved with the same, will follow all regulatons, restrictions and requirements set forth by Local, State, Federal and National authorities. We do hereby confirm that said organization, and all groups, individuals and/ or other associations involved with the same, are, to the best of our knowledge, in no way connected with, or otherwise involved in, any form of terrorist activity.

May 2, 2016

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

May 12, 2016

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 May 3, 2016

Signature

Patricia L. Kennedy
(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)

Patricia L. Kennedy

(Typed or printed name of person signing)

Chairperson, Secretary, Treasurer

(Title of person signing)