

103000007140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

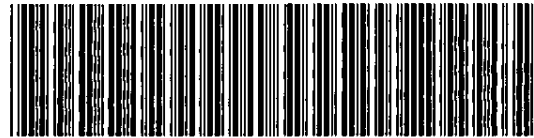
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800212867708

10/11/11--01037--001 **35.00

FILED
2011 OCT 20 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/10
10-20-11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DIT BOOTCAMP FOUNDATION, INC

DOCUMENT NUMBER: N03000007140

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

Please return all correspondence concerning this matter to the following:

Sonya Callender

(Name of Contact Person)

DIT BOOTCAMP, INC

(Firm/ Company)

1928 Boothe Circle

(Address)

Longwood, FL 32750

(City/ State and Zip Code)

sonya@ditbootcamp.com

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

For further information concerning this matter, please call:

Sonya Callender

(Name of Contact Person)

at (407) 332-0195

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 12, 2011

SONYA CALLENDER
DIT BOOTCAMP, INC.
1928 BOOTHE CIRCLE
LONGWOOD, FL 32750

SUBJECT: D.I.T. BOOTCAMP FOUNDATION, INC
Ref. Number: N03000007140

We have received your document for D.I.T. BOOTCAMP FOUNDATION, INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is H77465 - LIFE WORKS, INC..

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 911A00023455

RECEIVED

11 OCT 20 AM 8:50

REGISTRAR OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

DIT BOOTCAMP FOUNDATION, INC.

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

N03000007140

(Document Number of Corporation (if known))

FILED
2011 OCT 20 PM 2:49
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:

LIFE WORKS INSTITUTE, 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)

$\epsilon = \frac{1}{\sqrt{2}}$

$\gamma_1, \gamma_2, \dots$

$(x^*)_{ij}$

$H(x)$

μ_i

The date of each amendment(s) adoption: 10-17-11
(date of adoption is required)

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

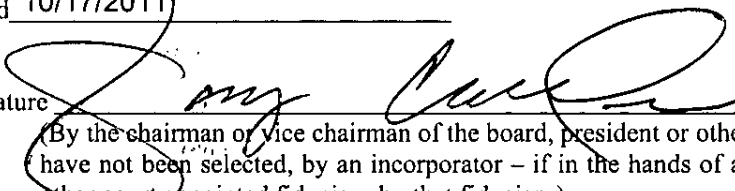
Adoption of Amendment(s) (CHECK ONE)

☒ 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 10/17/2011

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)

Sonya Callender

(Typed or printed name of person signing)

President

(Title of person signing)