N05000003000

(Re	equ es tor's Name)	
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	÷#)
—	—	—
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Casaial Instructions to	Eiling Officer:	
Special Instructions to Filing Officer:		
		1

Office Use Only



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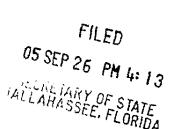
Amend

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Down Syndrome Awareness Group, Inc.		
DOCUMENT NUMBER: N050000030	000	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning t	this matter to the following:	
Kim Portell		
(Name of Contact Person)		
	- Alexandra	
(Fire	n/ Company)	
oroz Osiffia Dand		
3527 Griffin Road	Address)	
,		
Ft Lauderdale, Fl 33312		
	ate and Zip Code)	
For further information concerning this matte	er, please call:	
Kim Portell	at (239) 699-8470	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount	:	
☑ \$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) 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 32399	

Articles of Amendment to Articles of Incorporation of



Down Syndrome Awareness Group, Inc.
(Name of corporation as currently filed with the Florida Dept. of State)
N0500003000
(Document number of corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may <u>not</u> be used in the name of a not for profit corporation)
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Tracy Smoak - Delete
Harriet Nardi - Delete
Diana Hagen Add Same Address Director
Monica Equino Add Same Address Director

(Attach additional pages if necessary) (continued)

The date of adoption of the amendment(s) was: September 15,2005		
Effective date if <u>applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	as (were) adopted by the members and the number of votes cast as sufficient for approval.	
	rs or members entitled to vote on the amendment. The vere) adopted by the board of directors.	
have not been sele	or vice chairman of the board, president or other officer- if directors acted, by an incorporator- if in the hands of a receiver, trustee, or led fiduciary, by that fiduciary.)	
Barbara G.		
(Тур	ped or printed name of person signing)	
President		
	(Title of person signing)	

FILING FEE: \$35