# N0000012518

(Re	equestor's Name)	
(Ad	ldress)	
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Amend Name
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#### **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations FLORIDA AUTISM CHARTER SCHOOL OF EXCELLENCE, INC. NAME OF CORPORATION: DOCUMENT NUMBER: N06000012518 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Linda Socolow Name of Contact Person SHUTTS & BOWEN LLP Firm/ Company 200 E. Broward Blvd., Suite 2100 Fort Lauderdale, FL 33301 City/ State and Zip Code Isocolow@shutts.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Linda Socolow Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** 

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



November 6, 2012

Ms. Irene Albritton
Department of State
Division of Corporations
Corporate Filings
P. O. Box 6327
Tallahassee, FL 32314

Re: Dissolution of Corporation for FLORIDA AUTISM CENTER OF EXCELLENCE, INC.
Document No. N06000012517/Letter Number: 912A00025578

Dear Ms. Albritton:

I am the Secretary of FLORIDA AUTISM CENTER OF EXCELLENCE, INC. The Corporation has no intention of reinstating the corporate name and permanently surrenders, relinquishes and releases the corporate name to the Florida Autism Charter School of Excellence, Inc.

Sincerely,

Donald B. Whitfield

Secretary



October 17, 2012

LINDA SOCOLOW SHUTTS & BOWEN LLP 200 E. BROWARD BLVD - STE. 2100 FORT LAUDERDALE, FL 33301

SUBJECT: FLORIDA AUTISM CHARTER SCHOOL OF EXCELLENCE, INC.

Ref. Number: N06000012518

We have received your document for FLORIDA AUTISM CHARTER SCHOOL OF EXCELLENCE, INC. 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 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 N06000012517 - FLORIDA AUTISM CENTER OF EXCELLENCE, 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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 912A00025578

#### Articles of Amendment to Articles of Incorporation

## FLORIDA AUTISM CHARTER SCHOOL OF EXCELLENCE, INC.

(Name of Corporation as currently filed v	with the Florida Dept. of St	ate)	_
N06000012518	·		_
(Document Number of Corp	poration (if known)		_
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this <i>Florida Profit Co</i>	rporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corpor	ration:		
FLORIDA AUTISM CENTER OF EX	KCELLENCE, INC	<b>)</b> .	The new
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	lnc," or "Co". A professio		ubbreviation
B. Enter new principal office address, if applicable:			数学 <del>- 加載</del> - Man dis
(Principal office address <u>MUST BE A STREET ADDRES</u>	( <u>22</u>		3
•			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
			- O 4
			- <b>en</b>
	·	<del></del>	_
D. If amending the registered agent and/or registered onew registered agent and/or the new registered offic		ter the name of the	
new registered agent and/or the new registered offic	e address:		
Name of New Registered Agent		<del></del>	
	Florida street address)	<del> </del>	
·	•		
New Registered Office Address:	(City)	, Florida	_
		, ,	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		e obligations of the position.	
	- · · · · · · · · · · · · · · · · · · ·	<i>y y y</i>	
Signature of New Re	egistered Agent, if changing	<del></del>	

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)

Example:

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: X Change	PT J	ohn Doe	
X Remove	<u>V</u> <u>N</u>	<u> Aike Jones</u>	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	C/D	Jereme Williams	6400 E. Chelsea St
X Add			Tampa, FL 33610
Remove			
Change	<u>D</u>	Brenda Connolly	6400 E. Chelsea St
X Add			Tampa, FL 33610
Remove			
3 ) Change	<u>D</u>	Kelly Curington	6400 E. Chelsea St
X Add			Tampa, FL 33610
Remove			
4) Change	D	David Epstein	6400 E. Chelsea St
X Add			Tampa, FL 33610
Remove			
5) Change	D	Mary Helenius	6400 E. Chelsea St
$X_{Add}$			Tampa, FL 33610
Remove			
6) Change	D	Kavita Kalidas	6400 E. Chelsea St
X			Tampa, FL 33610
Remove			

#### Articles of Amendment to Articles of Incorporation of

### FLORIDA AUTISM CENTER OF EXCELLENCE, INC.

Page 2a of 4			
XX_Add	<u> </u>	M. Katie Porta	6400 E. Chelsea Street
			<u>Tampa, FL 33610</u>
XX_Add	<u>T</u>	Phil Nahajewski	6400 E. Chelsea Street
			Tampa, FL 33610
XX_Add	<u>s</u>	Thomas J. Porter	6400 E. Chelsea Street
			Tampa, FL 33610

, ,	icles, enter change(s) here: (Be specific)
- ·	
·	
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an analysis of the instance of the same of the
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s)	September 26, 2012
Effective date if applicable:	eptember 26, 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a by the shareholders was/were	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes ca	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were a action was not required.	lopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated 9/27	/12
Signature	KatuPorla
	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court
	nted fiduciary by that fiduciary)
	M. Katie Porta
	(Typed or printed name of person signing)
	President
	(Title of person signing)