## N08000005023

(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	. MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		·

Office Use Only



600243667046

01/22/13--01019--002 \*\*52.50

Ames

JAN 22 AM 9:

JAN 2 7 ZOTÓ T. ROUENTO

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	nann-Picks Dis	sease Foundation, Inc.
DOCUMENT NUMBER: NO8000050	)23	
The enclosed Articles of Amendment and fee are submi	tted for filing.	
Please return all correspondence concerning this matter	to the following:	
Janet Christiansen		
(1	Name of Contact Persor	)
	(Firm/ Company)	<del></del>
PO Box 1681		,
	(Address)	
Pine Lake, GA 30072-168	31	
((	City/ State and Zip Code	e)
jlchristiansen@aol		
E-mail address: (to be used f	•	notification)
For further information concerning this matter, please ca	all:	
Janet Christiansen	at (404	387-1342 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Depa	artment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status	3\$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	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## **Articles of Amendment Articles of Incorporation**

## National Niemann-Picks Disease Foundation, Inc.

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

N08000005023

(Document Number of Corporation (if known)

FILED

13 JAN 22 AN 9-21

TALLAHASSEE FEORIDA

Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ition:
N/A	The new
	ration" 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	N/A E)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 1681
	Pine Lake, GA 30072-1681
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office  Name of New Registered Agent:  Janet Christian	address:
	mes Lee Blvd.
New Registered Office Address:	(Florida street address)
Crestview	, Florida 32536
(Cit	· · · · · · · · · · · · · · · · · · ·
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am Signature of New Registered Signature of New Registered Regis	

Page 1 of 4

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: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n <u>Doe</u> e <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PVST	David J Parker	5255 Griffith Mill Rd.
Add			Baker, FL 32531
X Remove			
2) Change	PVST	Janet Christiansen	PO Box 1681
X			Pine Lake, GA 30072-1681
Remove		•	
3) Change			
Add			
Remove			
4) Change			
Add			** * * * * * * * * * * * * * * * * * *
Remove			·
5) Change			
5) Change			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articletach additional sheets, if necessary).	(Be specific)
<u> </u>	
•	
·	
<del></del>	

The	date of each amendment(s) adoption: June 20, 2012				
	ctive date if applicable: June 20, 2012				
	(no more than 90 days after amendment file date)				
Adı	ption 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 7/20/12 Signature Signature Authorition Survivance				
	(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)				
	Janet Christiansen				
	(Typed or printed name of person signing)				
	President Vice President Secretary Treasurer				

(Title of person signing)