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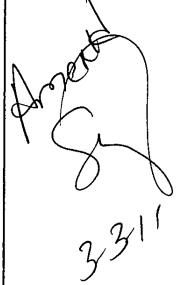
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: EMERALD COAST A	UTISM CENTER,	INC.
DOCUMENT NUMBER: N0900005339		
The enclosed Articles of Amendment and fee are submitted for	filing.	
Please return all correspondence concerning this matter to the f	ollowing:	
JENNIFER H. COP		
(Name of Contact P	erson)	
COPUS & COPU	S, P.A.	
(Firm/ Compan	y)	-
1817 LEWIS TURNER BI	VD., SUITE E	
(Address)	-	
FORT WALTON BEAC	<u>Н, </u> FL 32547	
(City/ State and Zip	Code)	
jennifer@copusla E-mail address: (to be used for futur		on)
For further information concerning this matter, please call:		
JENNIFER H. COPUS, ESQ. at (_	850 <u>862-1433</u> (Area Code & Daytime	
(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:
Certificate of Status Certif	3.75 Filing Fee & ied Copy tional copy is sed)	☐ \$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 Ci	ircle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



EMERALD COAST AUTISM CENTER, INC.

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

N09000005339

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts

)	
	nter the name of the
orida street address)	
	, Florida (Zip Code)
	ce address in Florida, enddress:

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>	Name	Address	Type of Action
D	MIKE ALLEN	200 N. PARTIN DRIVE NICEVILLE, FL 32578	☑ Add □ Remove
			☐ Add ☐ Remove
E. If amending (attach addit	g or adding additional Articles, enter of ional sheets, if necessary). (Be specifi	change(s) here: c)	
	·		

The date of each amendment	(s) adoption: FEBRUARY 16, 2011
·	(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/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or radopted by the board of dir	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated FEB	RUARY 23, 2011 The chairman or vice chairman of the board, president or other officer-if directors
	e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	STACI BERRYMAN
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)