

112 000004280

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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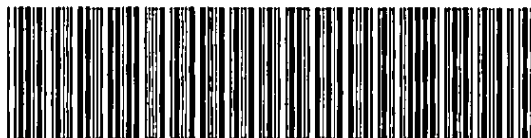
(Business Entity Name)

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Amend

2022 NOV -4 AM 11:50

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A. RAMSEY
FEB - 1 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Outreach Autism Services Network

DOCUMENT NUMBER: N12000004280

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

Please return all correspondence concerning this matter to the following:

Karen Vega

(Name of Contact Person)

Outreach Autism Services Network

(Firm/ Company)

7634 SW 60th Avenue

(Address)

Ocala, FL 34476

(City/ State and Zip Code)

kvega@oasn.info

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

For further information concerning this matter, please call:

Karen Vega

352

462-0168

at

(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:

☐ \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED
2022 NOV -4 AM 11:50

Outreach Autism Services Network

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

N12000004280

(Document Number of Corporation (if known))

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:

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:

(Florida street address)

New Registered Office 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

Amendments to
Articles of
Incorporation for
Outreach Autism
Services
Network Inc.
NI2000004280
(Document
Number of
Corporation)

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:

Article III-PURPOSE

Section 1. The purpose of OASN, organized as a non-profit organization, to facilitate the best outcomes for individuals with autism and related neuroimmune/neurodevelopmental disorders. This is accomplished by offering educational programs, services, support meetings, events and referrals to the individuals, families & caregivers served. All that we do is lead by faith and hope to impact our community in a positive way.

Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) or the corresponding section of any future federal tax code.

The date of each amendment(s) adoption: 11-3-2022, if other than the date this document was signed.

Effective date if applicable: 11-3-2022
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

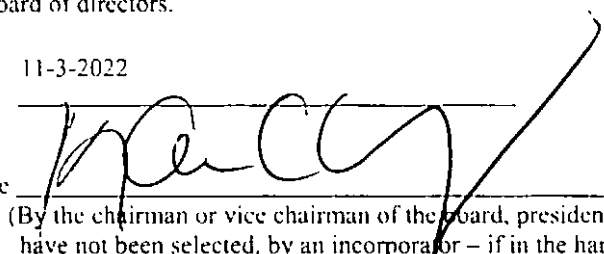
Adoption of Amendment(s) (CHECK ONE)

- ☒ 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 11-3-2022

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)

Karen Vega

(Typed or printed name of person signing)

Executive Director

(Title of person signing)