# N1200000016

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#### **COVER LETTER**

TO: Amendment Section **Division of Corporations** CENTER FOR DEMENTIA EDUCATION, INC. The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Carolyn Lukert (Name of Contact Person) Center for Dementia Education, Inc. (Firm/ Company) 23514 NW 122nd Avenue (Address) Alachua, FL 32615 (City/ State and Zip Code) cjlukert@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (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

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enclosed)

(Additional copy is

**Mailing Address** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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Enclosed)

#### Articles of Amendment to Articles of Incorporation



### CENTER FOR DEMENTIA EDUCATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N12000006216 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: N/A Florida (Zip Code) (City) 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.

Page 1 of 4

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)

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change		N/A		
Remove				
2) Change		N/A		
Add				
Remove  3) Change		N/A		
Add				
Remove				
4) Change		<u>N/A</u>		
Add Remove				
5) Change		N/A		
Add				
Remove				
6) Change		N/A	<del></del>	
Add				
Remove			•	

## E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

# Replace current Article III with the complete verbiage below: To significantly reduce the social and emotional isolation of people living with dementia (in themselves or in a loved one) through education and training programs. 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) of the Internal Revenue Code, or the corresponding section of any future federal tax code. Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations as said Court shall determine, which are organized and operated exclusively for such purposes.

The date of each am	endment(s) adoption: July 14, 2012	
Effective date if app	endment(s) adoption: July 14, 2012  licable:   Implement	
2	(no more than 90 days after amendment file date)	
Adoption of Amenda	nent(s) (CHECK ONE)	
The amendments was/were sufficient	s) was/were adopted by the members and the number of votes cast for the amendment(s) ent for approval.	
	mbers or members entitled to vote on the amendment(s). The amendment(s) was/were oard of directors.	
Dated Signatu	7/14/2012 (Jublyn) Luker	
0.8	(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)	
С	arolyn J. Lukert	
	(Typed or printed name of person signing)	
Р	resident, Center for Dementia Education, Inc.	
-	(Title of person signing)	