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# FLORIDA DEPARTMENT OF STATE Division of Corporations

March 1, 2016

ADRIANA FUREY 150 E. ROBINSON ST #2801 ORLANDO, FL 32801 US

SUBJECT: LYMEAID INC. Ref. Number: N13000002400

We have received your document for LYMEAID INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

You did not include the attachment for the dissolution.

If you have any questions concerning the filing of your document, please call (880) 245-6050.

Carolyn Lewis Regulatory Specialist II

Letter Number: 016A00004241

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LYMEALD INC.
N13000002400
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Apriana Furey
(Name of Contact Person)
(Firm/ Company)
150 E. ROBINSON ST. #2801
(Address)
ORLANDO, FL 32801
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
E-mail address: to be used for future annual report notification)
For further information concerning this matter, please call:
ADRIANA FURA at 407 - 484 - 9123 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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 U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certified Copy  (Additional Copy is Enclosed)
Mailing Address Street Address

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

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

# Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS:

16 APR 13 AM 10: 56

LYMEAID INC.		
(Name of Corporation a	s currently filed with the Flori	da Dept. of State)
N13000002400		
(Docume	ent Number of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:		Profit Corporation adopts the following
A. If amending name, enter the new name of the c	corporation:	
THE LYME COMPANY CORP.		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.  B. Enter new principal office address, if applicable (Principal office address)	le: NA	" or the abbreviation "Corp." or "Inc."
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	ox N/A	
D. If amending the registered agent and/or registered new registered agent and/or the new registered agent:  Name of New Registered Agent:	ered office address in Florida, of doffice address:	enter the name of the
<u>New Registered Office Address</u> :	(Flo	rida street address)
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		he obligations of the position.
	Signature of New Registe	ered 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 A Add	PT John D Y Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	CFO/T	AUDREY SIMMONS	519 MARNAN MARPLACE CLERMONT, FL 34711
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add	<del></del>		
Remove  5) Change			•
Add Remove			
6) Change Add		<del></del>	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
SEE ATTACHED AMENDMENT TO						
ARTICUES OF INCORPORATION.						

## AMENDMENT TO

## ARTICLES OF INCORPORATION

## LYMEAID INC.

**DOCUMENT NUMBER: N13000002400; EIN: 46-2360786** 

# February 17, 2016

The Articles of Incorporation of Lymeaid Inc. are hereby amended to reflect the following additions:

<u>Article III Purpose:</u> Said organization 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 described under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Article VIII Dissolution: Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or 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 disposed of shall be disposed of by a court of competent jurisdiction in the county in which the principal office of the organization 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.

	date of each amendment(s)	) adoption:	7 7 5	rithan the
date this document was signed.  Effective date if applicable:		FEBRUARY 17, 2016	SECRETARY OF C MUSICIO	OF STATE
		(no more than 90 days after amendment file date)	16 APR 13	AM 10: 56
		block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed a	s the
Ado	option of Amendment(s)	(CHECK ONE)		
	The amendment(s) was/were was/were sufficient for appr	e adopted by the members and the number of votes cast for the amendment oval.	ent(s)	
Ø	There are no members or madopted by the board of directions	embers entitled to vote on the amendment(s). The amendment(s) was/w ectors.	ere	
	2/17/16 Dated			
	Signature	duen Facy		
	have not	hairman or vice chairman of the board, president or other officer-if direct been selected, by an incorporator—if in the hands of a receiver, trustee, urt appointed fiduciary by that fiduciary)		
	ADR	IANA FUREY		
	···	(Typed or printed name of person signing)	<del></del>	
	PRES	SIDENT		
		(Title of person signing)		