Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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COR AMND/RESTATE/CORRECT OR O/D RESIGN OINT CHILDREN SPECIAL NEEDS FOUNDATION INC

| Certificate of Status | 0       |
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| Certified Copy        | 0       |
| Page Count            | 05      |
| Estimated Charge      | \$35.00 |

## Articles of Amendment to Articles of Incorporation of

| SOUTHPOINT CHILDREN SPECIAL  |   |
|--|---|
| (Name of Corporation as currently filed with the Flor  | ida Dept. of State)   |
| N13000002427   |   |
| (Document Number of Corporate  | ion (if known)  |
| Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:          | , this Florida Not For Profit Corporation adopts the following  |
| A. If amending name, enter the new name of the corporation   | <u>n:</u>   |
|  | The new   |
| name must be distinguishable and contain the word "corporation "Company" or "Co." may not be used in the name.           | on" or "incorporated" or the abbreviation "Corp." or "Inc."     |
| B. Enter new principal office address, if applicable:  |   |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | 20 C  |
| -  | -0 4  |
| -  | 2 2   |
| C. Enter new mailing address, if applicable:   | 26 P  |
| (Mailing address MAY BE A POST OFFICE BOX)   |   |
|  |   |
|  | S Th  |
|  |   |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad    |   |
| Name of New Registered Agent:  | <del></del>   |
|  |   |
| •  | Torida street address)  |
| New Registered Office Address:   |   |
|  | "Plorida  |
| (City)   | (Zip Code)  |
| New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam | sent:<br>iliar with and accept the obligations of the position. |
| Signature of New Registe   | red Agent, if changing  |

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 | PT<br>Y<br>SV | John Do<br>Mike Jo<br>Sally Sn | <u>nės</u> |             |         |
|----------------------------------|---------------|--------------------------------|------------|-------------|---------|
| Type of Action<br>(Check One)    | Title         |                                | Name       |             | Address |
| 1) Change                        |               | _                              |            |             |         |
| Remove                           |               |                                |            |             |         |
| 2) Change                        |               | _                              |            |             |         |
| Add Remove                       |               |                                |            |             |         |
| 3)Change                         |               | _                              |            | <del></del> |         |
| Add Remove                       |               |                                |            |             |         |
| 4) Change                        |               | _                              |            |             |         |
| Add Remove                       |               |                                |            |             |         |
| 5) Change                        |               | _                              |            |             |         |
| Add<br>Remove                    |               |                                |            |             |         |
| 6) Change                        | <del></del>   | _                              |            |             |         |
| Add                              |               |                                |            |             |         |
| Remove                           |               |                                | Pag        | e 2 of 4    |         |
|                                  |               |                                |            |             |         |

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

## Article III. Purpose:

This corporation is organized not for profit under the laws of the State of Florida and in accordance with Section 501(c) (3) of the Internal Revenue Code as a private foundation. Our purpose is offer quality and equal education for children of all background with physical and mental disability and promote and support the delivery of quality educational services to families with children who have disabilities so that they may receive an outstanding school educational services for their children from school ages 5 to 22 years of age, not cover by government agency, insurance or other organizations.

## Article IV. Dissolution:

The Corporation may not voluntarily dissolve without the consent of the all the officers of the Foundation. 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 Service Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to state or local government, for a public propose. Any such assets not so disposed of shall 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 proposes.

| The date of each amendment                           | t(s) adoption: 06/10/2013   |
|--|---|
| Effective date if applicable:                        | 03/12/2013  |
| Effective date it approach.                          | (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)                             | (CHECK ONE)   |
| The amendment(s) was/w<br>was/were sufficient for ap | vere adopted by the members and the number of votes cast for the amendment(s) pproval.  |
| There are no members or adopted by the board of      | members entitled to vote on the amendment(s). The amendment(s) was/were directors.  |
| Dated 06/  | 10/2013   |
|  |   |
| have   | e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary) |
| JOSE   | L. ALMEIDA  |
| <del></del>  | (Typed or printed name of person signing)   |
| PRESI  | DENT  |
| **************************************               | (Title of person signing)   |