N13000007553

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14 MAR 10 PM 12: 46
SECRETARY OF STATE

C. LEWIS

MAR 1 0 2014

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: KIDSMISDIAGNOSED. Can N13000007553 DOCUMENT NUMBER: _____ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TURBIN (Name of Contact Person) (Firm/ Company) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (727) 738 4888 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\omega\$s43.75 Filing Fee & \$\omega\$\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

Attached is a form for filing Articles of Amendment to amend the articles of incorporation of a Florida Not for Profit Corporation pursuant to section 617.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- > The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- If amending/adding officers/directors, list titles and addresses for each officer/director.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

The document must be typed or printed and must be legible.

Pursuant to section 617.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

For further information you may call the Amendment Section at (850) 245-6050

CR2E009 (7/13)

APPROVEL AND FILED

14 MAR 10 PM 12: 46

Articles of Amendment to Articles of Incorporation

SECRETARY OF STATE TALLAHASSEE, FLORIDA
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01
KIDSMISDIAGNOSED.COM INC.
(Name of Corporation as currently filed with the Florida Dept, of State)
N13000007553
(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:
KIDS MISDIA GNOSED, ORG THE NEW
name must be distinguishable and contain the word "corporation" 01 "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
B. <u>Enter new principal office address, if applicable;</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)
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.
, Florida
(City) (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

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	Y	John Do Mike Jor Sally Sm	nes	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1)Change		-		
Add				
Remove				
2) Change	-	-		
Add				
Remove				
3) Change		-		
Add				
Remove				
4) Change		_		
Add		-	<u> </u>	
Remove				
5) Change				
	***********	-		
Add				
Remove				
6) Change		_		
Add				
Remove				

f amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)
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APPROVED AND FILED

14 MAR 10 PH 12: 46 The date of each amendment(s) adoption: , if other than the SEURETARY OF STATE date this document was signed. TALLAHASSEE, FLORIDA Effective date if applicable: (no more than 90 days after amendment file date) 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. MARCH Dated 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) ALAN TURBIN (Typed or printed name of person signing) DINFCTON - TIZEAS UNER (Title of person signing)