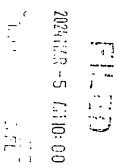
N14000002029

(Re	questor's Name)	
(Ad	dress)	
(Ad-	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	



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Office Use Only



COVER LETTER

TO: Amendment Section Division of Corporations

FOR AUTISM AGAINST BULLYING FOUNDATION, INC. NAME OF CORPORATION: N14000002029 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Tyra Fairley (Name of Contact Person) (Firm/ Company) 19625 NW 5th place (Address) Miami Gardens, FL, 33169 (City/ State and Zip Code) tyra_Fairley@yahoo.com E-mail address: (to be used for luture annual report notification) For further information concerning this matter, please call: Tyra Fairley 786 657-5195 (Name of Contact Person) (Area Code) (Daytime Telephone Number)

□\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status

Enclosed is a check for the following amount made payable to the Florida Department of State:

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 Articles of Incorporation

A	rticles of Incorporation of		File
FOR AUTISM AGAINST BULLYING FOUNDATION		200.	FILED
(Name of Corporation as currently filed with the Flo N14000002029	rida Dept. of State)	Z1171,	##3-5 /#10:
(Document)	Number of Corporation (if	known)	
Pursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not I</i>	or Profit Corporation ac	dopts the following
A. If amending name, enter the new name of the corp. Treat Us Fairly, Inc.	poration:		
name must be distinguishable and contain the word "con "Company" or "Co." may not be used in the name	poration" or "incorporat	ed" or the abbreviation "	The new **Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u>ESS</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 new registered agent and/or the new registered off	fice address:	"-	
Name of New Registered Agent:			
New Registered Office Address:	()	Florida street address)	
	Circ	, Florida	
New Registered Agent's Signature, if changing Regists I hereby accept the appointment as registered agent. I a	(City) ered Agent: m familiar with and accep	(Zip Co t the obligations of the po	
	Signature of New Regis	lured Agent, if changing	1

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 John Do V Mike Jo SV Sally Si	ones		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
() Change Add				
Remove				
2) Change Add				
Remove 3) Change Add Remove				
4) Change Add				
Remove 5) Change Add				
Remove 6) Change Add				
E. If amending or additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
	<u>, ,,= ,= ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,</u>			
			, , , , , , , , , , , , , , , , , , , 	

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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	block does not meet the applicable statutory filing requiremen	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appropriate the control of the	e adopted by the members and the number of votes east for the oval.	e amendment(s)

There are no members or readopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
2/24/	
Dated	
Signature	I gra Jarly
nave no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator—if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)
	a Fairley
	(Typed or printed name of person signing)
Pre	sident
·	(Title of person signing)

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