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(Requestor's Name)

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(City/State/Zip/Phone #)

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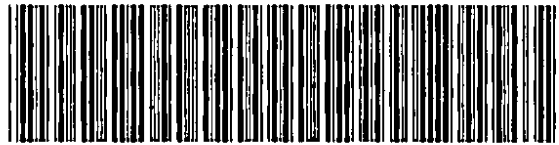
(Business Entity Name)

(Document Number)

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2020

## COVER LETTER

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

SUBJECT: Galaksi Foundation, Inc.

CORPORATE NAME

Enclosed are an original and one (1) copy of the restated articles of incorporation and a check for:

☐ \$35.00      ☐ \$43.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$43.75      ☒ \$52.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: Halifax Law Group

Name (Printed or typed)

PO Box 9357

Address

Daytona Beach, FL 32118

City, State & Zip

386-492-4880

Daytime Telephone number

paralegal@halifaxlawgroup.com

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the document.**

## RESTATED ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S. (Not for Profit)

### ARTICLE I NAME

The name of the corporation is: Galaksi Foundation, Inc.

### ARTICLE II RESTATED ARTICLES

The text of the Restated Articles is as follows: Galaksi Foundation, Inc. is a non-profit corporation and shall be operated exclusively for charitable, scientific and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, or the corresponding section of any future Federal tax code. The following are the purposes for which Galaksi Foundation, Inc. has been organized:

(a) to provide sustainable solutions for persons in low-income settlements by supporting and conducting non-partisan research using Science, Technology, Engineering and Mathematics tools; and

(b) to collaborate with other people and non-profit organizations which fall under the 501(c)(3) section of the Internal Revenue Service code and are operated exclusively for scientific, educational, and charitable purposes; and

(c) to provide internships or volunteer opportunities which shall create opportunities for involvement in the above said activities and programs in order to have a greater impact and for positive change in the communities being served by the organization.

### ARTICLE III OFFICERS AND/OR DIRECTORS (optional)

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change	<u>P</u>	<u>Sarah A. Matiko</u>	<u>1500 Beville Road</u>
<u>    </u> Add			<u>Suite 600-215</u>
<u>    </u> Remove			<u>Daytona Beach, FL 32114</u>
2) <u>X</u> Change	<u>D</u>	<u>Richard Stickney</u>	<u>1500 Beville Road</u>
<u>    </u> Add			<u>Suite 600-215</u>
<u>    </u> Remove			<u>Daytona Beach, FL 32114</u>
3) <u>X</u> Change	<u>D</u>	<u>Caroline W. Kamau</u>	<u>1500 Beville Road</u>
<u>    </u> Add			<u>Suite 606-215</u>
<u>    </u> Remove			<u>Daytona Beach, FL 32114</u>
4) <u>X</u> Change	<u>D</u>	<u>Madhu Nadig</u>	<u>1500 Beville Road</u>
<u>    </u> Add			<u>Suite 606-215</u>
<u>    </u> Remove			<u>Daytona Beach, FL 32114</u>
5) <u>    </u> Change	<u>    </u>	<u>                                    </u>	<u>                                    </u>
<u>    </u> Add			<u>                                    </u>
<u>    </u> Remove			<u>                                    </u>
6) <u>    </u> Change	<u>    </u>	<u>                                    </u>	<u>                                    </u>
<u>    </u> Add			<u>                                    </u>
<u>    </u> Remove			<u>                                    </u>

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Daytona Registered Agents  
Address: 1500 Beville Road Suite 606-215  
Daytona Beach, FL 32114

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Required Signature/Registered Agent

11/6/20  
Date

**ARTICLE VI ARTICLE CONSOLIDATION**

These adopted restated articles of incorporation supersede the original articles of incorporation and all amendments to them.

**ARTICLE VII REQUIRED ADOPTION INFORMATION**

Adoption of Amendment(s) (CHECK ONE)

☐ These restated articles of incorporation contain an amendment to the articles of incorporation which required member approval. The date of adoption of the amendments was \_\_\_\_\_, and the votes cast were sufficient for approval

☒ These restated articles of incorporation were adopted by the board of directors.

ARTICLE VIII EFFECTIVE DATE:

April 03, 2020

(OPTIONAL)

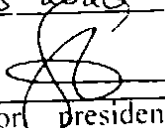
Effective date, if other than the date of filing:

(If an effective date is listed, the date must be specific and cannot be more than 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Dated: NOVEMBER 05 2020

Signature: 

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee or other court appointed fiduciary by that fiduciary)

Sarah A. Matiko

(Typed or printed name of person signing)

President, Galaksi Foundation, Inc.

(Title of person signing)