

N16000006166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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Amend

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17 MAY 24 PM 5:10

SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SCOPE INSTITUTE CORPORATION
NAME OF CORPORATION: _____

N16000006166
DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jonathan Nierman

(Name of Contact Person)

SCOPE INSTITUTE CORPORATION

(Firm/ Company)

221 Old Dixie Hwy Suite 6

(Address)

Tequesta, FL 33469

(City/ State and Zip Code)

jon@scopeinstitute.org

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

For further information concerning this matter, please call:

Sara Lassandro

561

9726724

(Name of Contact Person)

at

(Area Code)

(Daytime Telephone Number)

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

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

SCOPE INSTITUTE CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

N16000006166

(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:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

N/A

New Registered Office Address:

(Florida street address)

(City)

Florida

(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

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TALLAHASSEE, FLORIDA

FILED

(Attach additional sheets, if necessary)

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.

Example:

Type of Action
(Check One)

Name

Address

D

Rose Nierman

506 Sea Oats Drive #D2

Add

Juno Beach, FL 33408

Remove

2) Change

Add

Remove

3) Change

Add

 Remove

4) Change

_____ Add

Remove

5) _____ Change

Add

 Remove

6) Change

Add

Remove

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

ARTICLE III: TO ADVANCE THE EDUCATION OF SLEEP APNEA, TMJ, AND OROFACIAL PAIN TREATMENT
WITHIN DENTISTRY FOR THE SAKE OF ALLEVIATING THESE DISORDERS WITHIN THE POPULATION
WORLDWIDE.

ARTICLE IX: UPON DISSOLUTION OF SCOPE INSTITUTE CORPORATION, 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.

06/14/2016

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

06/14/2016

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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.

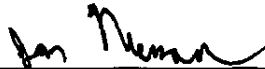
Adoption of Amendment(s) (CHECK ONE)

- ☒ 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.

5/16/2017

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)

JONATHAN NIERMAN

(Typed or printed name of person signing)

PRESIDENT DIRECTOR

(Title of person signing)