N45771

(Reque	stor's Name)	
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PICK-UP] WAIT	MAIL
(Busine	ss Entity Nam	e)
(Docum	nent Number)	
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SECRETARY OF STATE
ALLAHASSEF, FINALE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>East Central Dietetic Association</u> , Inc.
DOCUMENT NUMBER: 145771
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mandy Layman (Name of Contact Person)
(Firm/ Company)
1248 Bridlebrook Dr. (Address)
(Address)
Casselberry, FL 32707 (City/ State and Zip Code)
For further information concerning this matter, please call:
Mandy Ayman at (407) 650-7090 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 17, 2007

MANDY LAYMAN 1248 BRIDLEBROOK DR CASSELBERRY, FL 32707

SUBJECT: EAST CENTRAL DIETETIC ASSOCIATION, INC.

Ref. Number: N45771 .

We have received your document for EAST CENTRAL DIETETIC ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the <u>street address of the principal office</u> and, if different the <u>mailing address of the entity</u>. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 607A00061071

10/22/07

Hank you!

- Mandy H.

407-650-

Articles of Amendment to Articles of Incorporation

EUST CENTRAL DIETETIC HSSOCIUTION INTE.
(Name of corporation as currently filed with the Florida Dept. of State)
M 45771 (Document number of corporation (if known)
(Document number of corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit</i> Corporation adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
Orlando Dietetic Association, Inc.
must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in anguage; "Company" or "Co." may not be used in the name of a not for profit corporation)
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article
Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Principal Place of Blisiness:
Floxida Dietetic Association
Ath: Christine Stapell
P.O. Box 12608
Tallahassee, FL 32317-2608
Principal Office:
Florida Dietetic Association
1839 B Buford Court
Tallahassee, FL 32308
Mailing Address: Florida Dietetic Association
Attn: Christine Stapell
P.O. Box 12608
Tallahassee, FL 32317-2608
(Attach additional pages if necessary)

(Attach additional pages if necessary) (continued)

The date of adoption of the amendment(s) was: $\frac{09/20/2007}{}$
Effective date if applicable: immediately (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 was sufficient for approval.
There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.
Signature Many 4. James (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.)
Mandy H. Layman (Typod or printed name of person signing)
President (Title of person signing)

FILING FEE: \$35