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# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	on: International Fed	leration	on of No	nlinear An	alyst <b>s</b>	Inc.
DOCUMENT NUMBER:	#N93000000660				· ·	
The enclosed Articles of Am	nendment and fee are submit	ted for	filing.			
. Please return all corresponde	ence concerning this matter t	o the fo	ollowing:			
35 DA	Dr. Chris					
	(Name of Co	ntact Pe	erson)			
M N ≥H	International Federation	on of N	Nonlinear	Analyst		
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	Tampa,					
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	profcpt@usf.edu o					_
E	-mail address: (to be used for	or futur	e annual rep	ort notificatio	n)	
For further information cond	erning this matter, please ca	dl:				
Chris P. Tsokos or Reb	ecca D. Wooten	_ at (	813 <sub>)</sub>	961-1992	or 679-	9318
(Name of Cor	ntact Person)		(Area Cod	le & Daytime	Telepho	ne Number)
Enclosed is a check for the f	ollowing amount made paya	ible to t	he Florida	Department of	State:	
	43.75 Filing Fee & tificate of Status	Certifi	3.75 Filing I ied Copy tional copy sed)		Certific Certifie	50 Filing Fee cate of Status cd Copy onal Copy losed)
Mailing Add Amendment Division of O P.O. Box 632 Tallahassee,	Section Corporations 27		Clifton Bu 2661 Exec	nt Section f Corporations		\$3.75 + 35.00 + 35.00 \$113.75

# Articles of Amendment to Articles of Incorporation of

International Feder	ration of Nonlinear An	alysts, Inc. (IFNA)	
(Name of Corporation as curre	ently filed with the Florida D	ept, of State)	
#N93	3000000660	:	
(Document Nun	nber of Corporation (if known	)	
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of Ir		Not For Profit Corporation ado	pts
A. If amending name, enter the new name o	f the corporation:		
The new name must be distinguishable and cabbreviation "Corp." or "Inc." "Company" o			
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		BIO NOW -5 D	コニアで
D. If amending the registered agent and/or in the new registered agent and/or the new regi		lorida, enter the name of the	
Name of New Registered Agent:	Rebecca D. Woo	ten	
	11311 N. 50th St	. #2	
New Registered Office Address:	(Florida street add	ress)	
	Tampa	, Florida_33617	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered position.		Wooth	the

Page 1 of 3

# '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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	See Attached		
			□ n
E. If amen (attach a	ding or adding additional Article additional sheets, if necessary). (	es, enter change(s) here: Be specific)	
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# Officers of IFNA:

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Dr. Chris. P. Tsokos

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**NEWLY APPOINTED POSITIONS** 

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Dr. Rebecca D. Wooten

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Secretary

**Taysseer Sharaf** 

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### REMOVAL OF OLD POSITIONS

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# Dr. A. Vatsala

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# **Addition to IFNA Board of Directors:**

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# **Chunling Cong**

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# **Taysseer Sharaf**

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E-mail: tsharaf@mail.usf.edu

The date of each amendmen	t(s) adoption: October 20, 2010
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_11/0	04/2010
Signature	en A. Toka
(B)	y the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, of the court appointed fiduciary by that fiduciary)
	Chris P. Tsokos
	(Typed or printed name of person signing)
	President of IFNA
	(Title of person signing)

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