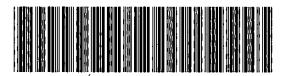
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SECRETARY OF STATE
TALLAHASSEE, FLORID

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### Active Filings

**Business Formation Services** 

#### Transmittal Letter

Type of Request:

☐ Expedited ☑ Normal

Date: Jun 19, 2006

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

Subject:

Statewide Administrators, Inc.

#### SUBMITTERS INFORMATION

Account #

Company Name:

Active Filings LLC

Return Address:

18100 W. Dixie Hwy. Suite 202, Miami, FL 33160-2058

Contact Person:

Robert Neuberger / Stephanie Francis

Phone number:

1-800-609-2521 x703

Fax number:

305-402-2248

Email address:

Operations@activefilings.com

#### DOCUMENT FILING REQUEST INFORMATION

Company Name:

Statewide Administrators, Inc.

File Number

P04000068376

Type of Filing:

Articles of Amendment

Reservation #

#### **PAYMENT INFORMATION**

Amount to pay:

\$35.00

Payment method:

☐ Credit Card ☑ Check

#### FILING INSTRUCTIONS / COMMENTS

Please be so kind to return proof of filing by mail.

#### METHOD OF RETURN

Messenger / Pick up

Courier service:

FedEx / DHL / UPS

Account Nbr:

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Regular Mail (please use the pre-addressed envelope)

Other:

Sincerely,

Roberto C. Neuberger Managing Member Active Filings LLC

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Statewide	Administrators, Inc.	***
DOCUMENT NUMBI	ER: P04000068376		
The enclosed Articles of	f Amendment and fee a	re submitted for filing.	
Please return all corresp	ondence concerning thi	is matter to the following:	
•		to Neuberger	
	(Name o	of Contact Person)	
	Active	Filings LLC	
	(Fir	rm/ Company)	
	18100 W Dix	ie Hwy Suite 202	
		(Address)	
	Miam	ni, FL 33160	
		tate and Zip Code)	
For further information	concerning this matter,	please call:	
Roberto	Neuberger	at ( 305 ) 792-0888	3
(Name of C	ontact Person)	(Area Code & Daytime Te	lephone Number)
Enclosed is a check for	the following amount:		
✓ \$35 Filing Fee	343.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section of Corp. P.O. Box 6327 Tallahassee, FL	tion porations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	e

#### Articles of Amendment to Articles of Incorporation of

FIL	ED
JUN 22	Au
SECRETARY LLAHASSEE	OF STATE

Statewide Administrators, Inc.

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

#### P04000068376

(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

## **NEW CORPORATE NAME (if changing):** Statewide Disability Advocates, Inc. (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) (Attach additional pages if necessary) If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: June 13, 2006
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
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)
Darryl Dawkins
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35