

### SECRETARY OF THE STATE OF CONNECTICUT

MAILING ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, P.O. BOX 150470, HARTFORD, CT 06115-0470

DELIVERY ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, 30 TRINITY STREET, HARTFORD, CT 06106

PHONE: 860-509-6003

WEBSITE: www.concord-sots.ct.gov

## **CERTIFICATE OF AMENDMENT**

### STOCK CORPORATION

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH 81/2 X 11 SHEETS IF NECESSARY.

FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS):	FILING FEE: \$100	
NAME:	MAKE CHECKS PAYABLE TO "SECRETARY	
	OF THE STATE"	
ADDRESS:		
CITY:		
STATE: ZIP:		
1. NAME OF CORPORATION:		
I. NAME OF CORPORATION.		
2. THE CERTIFICATE OF INCORPORATION IS (CHECK A, B OR C):		
A. AMENDED		
☐ B. RESTATED		
C. AMENDED AND RESTATED		
C. AMENDED AND RESTATED		
THE RESTATED CERTIFICATE CONSOLIDATES ALL AMENDMENTS INTO A SINGLE DOCU	MENT.	
3. CHECK 3A OR 3B OR BOTH, AS APPROPRIATE.		
☐ 3A. TEXT OF EACH AMENDMENT / RESTATEMENT:		

FORM CAS-1-1.0 REV. 10/2014

☐ 3B. ELECTION OF BENEFIT CORPOR	RATION STATUS. (MUST check box 3B if el	ecting Benefit Corporation Status.)	
corporation is formed, the corpora defined in the Connecticut Benefi specific public benefits in addition	enefit Corporation. In addition to the state ation shall also have the purpose to creat Corporation Act. [NOTE: If the Benefin to the required general public benefit, box 3A, "TEXT OF EACH AMENDMENT should be checked on the form.]	eate a general public benefit as it Corporation adopts one or more then the corporation must set forth	
4. VOTE INFORMATION (SELECT A	A, B, C OR D):		
	ROVED BY SHAREHOLDERS IN THE MAINNECTICUT GENERAL STATUTES, AN		
B. THE AMENDMENT WAS APPROVED BY THE INCORPORATORS. NO SHAREHOLDER APPROVAL WAS REQUIRED.			
C. THE AMENDMENT WAS APPR NO SHAREHOLDER APPROV	ROVED BY THE BOARD OF DIRECTORS AL WAS REQUIRED.	<b>5.</b>	
	ED BY A MINIMUM STATUS VOTE, AS REQI ELECT D IF A MINIMUM STATUS VOTE RES S.		
5. EXECUTION:			
DATED THIS	DAY OF	, 20	
NAME OF SIGNATORY (print or type)	CAPACITY/TITLE OF SIGNATORY	SIGNATURE	

# INSTRUCTIONS FOR COMPLETION OF THE CERTIFICATE OF AMENDMENT STOCK CORPORATION

#### **INSTRUCTIONS**

PLEASE NOTE THAT THIS FORM MAY BE USED FOR ALL AMENDMENTS, INCLUDING A CHANGE IN THE CORPORATION'S NAME.

- 1. NAME OF CORPORATION: Please provide the complete name of the corporation, as it currently appears on the records of the Secretary of the State. Note: If the corporation is adopting a new name, it must be set forth in item number 3 on the form.
- 2. THE CERTIFICATE OF INCORPORATION IS (check A, B or C): Please place a check next to the appropriate function. Note: If the Certificate of Incorporation is either Restated or Amended and Restated, each element of the corporation's certificate of incorporation must be set forth in item number 3 or on a referenced attachment

A. Amended Only: Check this block only if the company's Certificate of

Incorporation is being amended. Example: the company's name is being changed.

B. Restated Only: Check this block only if the provisions of the original Certificate of Incorporation, as

supplemented and amended, are merely being restated so that the effective provisions of the Certificate of Incorporation are integrated into one document. There cannot be any discrepancy between the above mentioned provisions and the provisions being

restated.

- C. Amended and Restated: Check this block only if the Certificate of Incorporation is being amended and every article of the original Certificate of Incorporation, as supplemented and amended, are integrated into one document.
- 3A. TEXT OF EACH AMENDMENT / RESTATEMENT: Please provide the full text of each amendment. In the case of an Amended and Restated certificate, provide the text of each amendment followed by a complete restatement of the corporation's certificate of incorporation. In the case of a Restatement, provide a complete expression of the corporation's certificate of incorporation. If the corporation elects Benefit Corporation status and adopts one or more specific public benefits in addition to the required general public benefit, then the corporation must set forth any adopted specific public benefits in this space. If so, then both Box 3A and 3B should be checked.
- 3B. ELECTION OF BENEFIT CORPORATION STATUS: This box must be checked if the corporation elects to be a Benefit Corporation under the Connecticut Benefit Corporation Act. If the Benefit Corporation elects to adopt one or more specific public benefits in addition to the required general public benefit, then it must include any adopted specific public benefits in Box 3A, TEXT OF EACH AMENDMENT/RESTATEMENT, above. If using Box 3A to set forth specific public benefits, the corporation must check BOTH box 3A AND 3B.
- 4. APPROVAL INFORMATION (select A, B, C or D): Please choose and complete A if shareholder approval was required and taken. Select B if the amendment, amendment and restatement or restatement was approved by incorporators without the need for shareholder approval. Select C if the amendment, amendment and restatement or restatement was approved by the board of directors without the need for shareholder approval. Select D if a Minimum Status Vote resulted in the election of Benefit Corporation status.
- 5. EXECUTION: The document must be executed by an authorized official of the corporation. That person must print or type their name, state the capacity under which they sign and provide a signature. The execution constitutes a legal statement under the penalties of false statement that the information provided in the document is true.