



Secretary of the State of Connecticut

PHONE: 860-509-6003 • EMAIL: crd@ct.gov • WEB: www.concord-sots.ct.gov

OFFICE USE ONLY
(label)

CERTIFICATE OF AMENDMENT STOCK CORPORATION

- Use ink. • Print or type.
- Attach additional 8 1/2 x 11 sheets if necessary

<p>FILING PARTY (confirmation will be sent to this address):</p> <p>NAME:</p> <p>ADDRESS:</p> <p>CITY:</p> <p>STATE: ZIP:</p>	<p>FILING FEE: \$100.00</p> <p>Make checks payable to "Secretary of the State"</p>
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1. NAME OF CORPORATION (required) (must exactly match the name on record with our office, including the business designation, (e.g., Inc., Corp, Corporation, etc):

2. STATEMENT OF AMENDMENT (required) (check only one of the following statements, 2A, 2B, or 2C)

THE CERTIFICATE OF INCORPORATION IS:

2A AMENDED ONLY. In section 3A below, provide the full text of any amendments to the corporation's certificate of incorporation, including any name changes.

2B AMENDED AND RESTATED. In section 3A below, provide the full text of each amendment **and** attach a complete restatement of the corporation's certificate of incorporation, incorporating the amendments.

2C RESTATED. Attach one document consolidating all previous amendments into the corporation's Certificate of Incorporation.

3. CHECK THE BOX 3A, 3B ON THE NEXT PAGE, OR BOTH, AS APPLICABLE

3A. TEXT OF AMENDMENTS / SPECIFIC PUBLIC BENEFITS
(if electing Benefit Corporation status in Section 3B on the next page, provide the text of the specific public benefits here, if any.)

check box if additional pages are attached

3B. STATEMENT ELECTING BENEFIT CORPORATION STATUS
(**Must** check box 3B to elect benefit corporation status)

The corporation elects to be a Benefit Corporation. In addition to the stated purposes for which the corporation is formed, the corporation shall also have the purpose to create a general public benefit as defined in the Connecticut Benefit Corporation Act.

NOTE: If the Benefit Corporation adopts one or more specific public benefits in addition to the required general public benefit, check box 3A in addition to 3B, and set forth the specific public benefits in the space provided for in section 3A above.

4. STATEMENT OF APPROVAL (required) (must check the box for only one statement, 4A, 4B, 4C or 4D)

- 4A** THE AMENDMENT WAS APPROVED BY SHAREHOLDERS IN THE MANNER REQUIRED BY SECTIONS 33-600 TO 33-998 OF THE CONNECTICUT GENERAL STATUTES, AND BY THE CERTIFICATE OF INCORPORATION.
- 4B** THE AMENDMENT WAS APPROVED BY THE INCORPORATORS. NO SHAREHOLDER APPROVAL WAS REQUIRED.
- 4C** THE AMENDMENT WAS APPROVED BY THE BOARD OF DIRECTORS. NO SHAREHOLDER APPROVAL WAS REQUIRED.
- 4D** THE AMENDMENT WAS APPROVED BY A MINIMUM STATUS VOTE, AS REQUIRED BY THE CONNECTICUT BENEFIT CORPORATION ACT. SELECT D IF A MINIMUM STATUS VOTE RESULTED IN THE ELECTION OF BENEFIT CORPORATION STATUS.

5. EXECUTION/SIGNATURE (required) (subject to penalty of false statement)

DATE (mm/dd/yyyy): _____ / _____ / _____

NAME OF SIGNATORY (print or type)	CAPACITY/TITLE OF SIGNATORY (print or type)	SIGNATURE
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CERTIFICATE OF AMENDMENT
STOCK/BUSINESS CORPORATION

INSTRUCTIONS

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

NUMBERS CORRESPOND TO SECTION NUMBERS ON THE FORM

- 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 section 3A on the form.
- 2. STATEMENT OF AMENDMENT.** Please place a check in the box next to the appropriate statement, 2A, 2B or 2C. 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.

2A Amended Only: Check box 2A only if the company's Certificate of Incorporation is being amended.
Example: the company's name is being changed.

2B Amended and Restated: Check box 2B only if the Certificate of Incorporation is being amended and every article of the original Certificate of Incorporation, as supplemented and amended, are incorporated into one document.

2C Restated Only: Check box 2C 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 consolidated into one document. There cannot be any discrepancy between the above-mentioned provisions and the provisions being restated.
- 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. STATEMENT OF APPROVAL.** Check the box for A, B, C or D, whichever is applicable.
4A Check box A if shareholder approval of the amendment was required and taken.
4B Check box B if the amendment, amendment and restatement, or restatement was approved by incorporators without the need for shareholder approval.
4C Check box C if the amendment, amendment and restatement or restatement was approved by the board of directors without the need for shareholder approval.
4D Check box D if a Minimum Status Vote resulted in the election of Benefit Corporation status.
- 5. EXECUTION/SIGNATURE.** The document must be executed/signed by an authorized official of the corporation. That person must print or type their name, state the title/capacity under which they execute/sign, and provide a signature. The execution/signature constitutes a legal statement subject to the penalties of false statement that the information provided in the document is true.

OFFICE OF THE SECRETARY OF THE STATE

MAILING ADDRESS:

BUSINESS SERVICES DIVISION
CONNECTICUT SECRETARY OF THE STATE
P.O. BOX 150470
HARTFORD, CT 06115-0470

DELIVERY ADDRESS:

BUSINESS SERVICES DIVISION
CONNECTICUT SECRETARY OF THE STATE
165 CAPITOL AVE SUITE 1000
HARTFORD, CT 06106

PHONE: 860-509-6003

WEBSITE: www.concord-sots.ct.gov