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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

| Bridges Across Borders Community Legal Education Initiative (BABSEA CLE | | | | | |
|--|--|---|--|--|--|
| DOCUMENT NUMBER: N1000002 | 898 | | | | |
| DOCUMENT NUMBER | | | | | |
| The enclosed Articles of Amendment and fee are subm | nitted for filing. | | | | |
| Please return all correspondence concerning this matter | er to the following: | | | | |
| Manuel Martinez | | | | | |
| | (Name of Contact Persor | 1) | | | |
| | | | | | |
| | (Firm/ Company) | | | | |
| 319 Adelphi Steeet | | | | | |
| | (Address) | | | | |
| Brooklyn, NY 11205 | | | | | |
| | (City/ State and Zip Code | e) | | | |
| MJamesMartinezo | @gmail.con | า | | | |
| E-mail address: (to be used | for future annual report | notification) | | | |
| For further information concerning this matter, please | call: | | | | |
| Manuel Martinez | _{at} 352 | 316-0888 | | | |
| (Name of Contact Person) | (Area Co | ode & Daytime Telephone Number) | | | |
| Enclosed is a check for the following amount made pa | yable to the Florida Depa | artment of State: | | | |
| □ \$35 Filing Fee □\$43.75 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Amend Division Clifton 2661 E | Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301 | | | |

Articles of Amendment to Articles of Incorporation of

Bridges Across Borders Community Legal Education Initiative (BABSEA CLE)

| (Name of Corporation as currently filed with the Flor | | - |
|---|--|--------------|
| N1000002898 | | |
| (Document Number of Corpora | ation (if known) | - |
| ursuant to the provisions of section 617.1006, Florida Statutes mendment(s) to its Articles of Incorporation: | s, this Florida Not For Profit Corporation adopts the | following |
| . If amending name, enter the new name of the corporation | on: | |
| | | _The new |
| ame must be distinguishable and contain the word "corporat Company" or "Co." may not be used in the name. | ion" or "incorporated" or the abbreviation "Corp." | or "Inc." |
| s. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>) | J | - |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 319 Adelphi Street | _ |
| | Brooklyn, NY 11205 | - |
| | | - |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office at Name of New Registered Agent: | | |
| New Registered Office Address: | (Florida street address) | |
| New Registered Office Address. | | |
| (City) | , Florida (Zip Code) | |
| New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fai | Agent: miliar with and accept the obligations of the position: | 13 FEB |
| Signature of New Regist | tered Agent, if changing | |
| 1 | Page I of 4 | SERVE FILE |
| | | 91.2 |

| . If amending or adding additional Art (attach additional sheets, if necessary). | (Re specific) | <u>uere</u> . | | |
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| (anden additional sneets, if necessary). | (be specific) | | | |
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| [he | date of each amendmen | t(s) adoption: December 28, 2012 | |
|---------------------------------------|--|---|--|
| Effective date <u>if applicable</u> : | | December 28, 2012 | |
| J110 | enve date in applicable. | (no more than 90 days after amendment file date) | |
| ۸da | option of Amendment(s) | (CHECK ONE) | |
| | The amendment(s) was/w was/were sufficient for ap | vere adopted by the members and the number of votes cast for the amendment(s) opproval. | |
| | There are no members or adopted by the board of | members entitled to vote on the amendment(s). The amendment(s) was/were directors. | |
| | Dated Jar | nuary 25 2013 | |
| | Signature | | |
| | (By the | e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary) | |
| | Manue | l Martinez | |
| | | (Typed or printed name of person signing) | |
| | Officer | | |
| | | (Title of percan simina) | |