Florida Department of State **Division of Corporations** Electronic Filing Cover Sheet

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REGISTERED AGENT CHANGE SOUTHERN POVERTY LAW CENTER, INC.

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March 3, 2010

FLORIDA DEPARTMENT OF STATE

SOUTHERN POVERTY LAW CENTER, INC. Davision of Corporations

400 WASHINGTON AVENUE MONTGOMERY, AL 36104US

SUBJECT: SOUTHERN POVERTY LAW CENTER, INC.

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Tina Roberts Regulatory Specialist II FAX Aud. #: E10000047543 Letter Number: 210A00005194

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Alabama
in order to change its registered affice of	or registered agent, or both, in the State of Florida.
I. The name of the corporation: Southern Powerty.	Law Center, Inc.
2. The principal office address: 400 Washington.	Ave., Montgomery, AL 36104
3. The mailing address (if different):	
4. Date of incorporation/qualification: 12/1	1/1995 Document number: <u>F9500004015</u>
The name and street address of the current reg Florida Department of State: (If resigned, ente	istered agent and registered office on file with the resigned)
THE PRENTICE-HALL CORPO	DRATION SYSTEM Fee 5
1201 HAYS STREET, STE. 105	三
TALLAHASSEE 32301	Sold to I
6. The name and street address of the new registe (if changed):	FE ST ST
Business Filings Incorporated	87 S1
1203 Governors Square Blvd., S.	nite 101
	O. Box NOT acceptable
Tallahassee, Florida 32301-2960	
The street address of its registered office and the as changed will be identical.	ne street address of the business office of its registered agent,
Such change was authorized by resolution duly authorized by the board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.
Viene Hutcheson	Teenie Hutchison, Secretary
Signature of an officer or director	Printes or typed name and bite
I further agree to comply with the provisions of of my duties, and I am jamiliar with and accept document is being filed merely to reflect a char corporation has been notified in writing of this	reent and agree to act in this capacity. Fail statutes relative to the proper and complete performance t the obligation of my position as registered agent. Or, if this use in the registered office address, I hereby confirm that the change.
By: Musice	2/2/2010
Signature of Registered Agent	. Date
If signing on behalf of an entity:	
Mark Williams, A.V.P., Business Filings Incorpora	ted.
	ING FEE: \$35.00 * * *
MAKE CHECKS PAYABLE	e to Florida Department of State Tons, P.O. Box 6327, Tallahassee, FL 32314

PL006 - 07/23/2009 C T System Online

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