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(Address)

(Address)

(City/State/Zip/Phone #)

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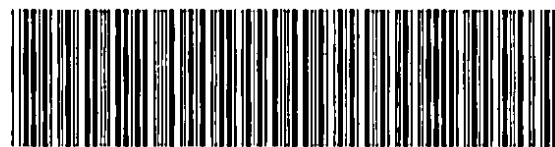
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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: OLD ANTARCTIC EXPLORERS ASSOCIATION, INC.

DOCUMENT NUMBER: N00000007191

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARLIN G. DILLER

(Name of Contact Person)

OAEA, Inc.

(Firm/ Company)

95 McKEEN STREET

(Address)

BRUNSWICK, MAINE 04011-2936

(City/ State and Zip Code)

UPIZAUF@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARLIN G. DILLER

207

729 - 0197

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|--|---|---|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

OLD ANTARCTIC EXPLORERS ASSOCIATION, INC.

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

N00000007191

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name*

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

Signature of New Registered Agent, if changing

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

1) In ARTICLE III, delete the following first six (6) bullets:

- To stimulate and perpetuate love of country our Flag, support and appreciation for the service and sacrifices of all our Military Forces, past and present.
- To defend the honor, integrity, and supremacy of our national government and the Constitution of the United States.
- To support, develop, encourage, foster, and stimulate the continued exploration of Antarctica for the peaceful, scientific, and ecological benefits of all mankind. Advance, promote, sustain reasonable efforts to locate, identify, verify, collect, catalog, preserve artifacts and memorabilia pertaining and relating to the exploration of the **Antarctic**, and
- To collect, record, illuminate oral, written, personal histories and sacrifices of Antarctic Explorers and honor those who gave their lives in the quest, and
- To develop and perpetuate national awareness of the sacrifices members have made in Antarctica through exhibition of associated artifacts and educational assistance programs, and
- To present the best interests and rights of Antarctic Explorers to proper authority when appropriate.

And replace them with the following:

- Bring together people interested in research and exploration in the Antarctic;
- Preserve the record of polar research and exploration; and
- Support and encourage research and exploration in the Antarctic.

Toward these ends, the OAEA will:

- Collect and disseminate information about the Antarctic region (including the surrounding ocean and the space above);
- Compile written records, oral histories, maps, photographs, film and video, and electronic information relating to Antarctica;
- Aid organizers and members of Antarctic expeditions; and
- Maintain contact with scientists, explorers, research institutions and interested parties.

2) Delete current ARTICLE IV and replace it with the following:

**ARTICLE IV. MANNER OF ELECTION**

The manner in which officers and directors are elected or appointed shall be as stated in the bylaws of the Old Antarctic Explorers Association, Inc.

16 OCTOBER 2018

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

16 OCTOBER 2018

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Adoption of Amendment(s) (CHECK ONE)**

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 02 JANUARY 2019 \_\_\_\_\_

Signature Marlin G. Diller  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MARLIN G. DILLER

\_\_\_\_\_  
(Typed or printed name of person signing)

SECRETARY

\_\_\_\_\_  
(Title of person signing)

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AMERICAN BAR ASSOCIATION