N08000002407

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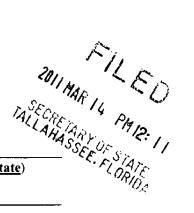
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Veteran Supp	ort Center,Inc	
DOCUMENT NUM	BER: N08000002407		
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		F. Solsona	
	(Name of	Contact Person)	
	National Associa	ation of Senior Veterans	
	(Firm	n/ Company)	
	1845 Town	Center Suite 110	
	(.	Address)	
	Flemina t	sland, FL 32003	
		ite and Zip Code)	
		retsmatter.org	eation)
For further information	on concerning this matter, pleas	e call:	
Joe Solsona		at (904) 394-390 (Area Code & Dayti	08
(Name	of Contact Person)	(Area Code & Dayti	me Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departmen	nt of State:
\$35 Filing Fee		☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. I	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente	ons

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Veteran Support Center, Inc.

(Name of Corpo	ration as cur	rently filed	with the l	Florida Dept.	of State)

N08000002407

(Document Number of Corporation (if known)

	of the corporation:	
	tion of Senior Veterans, Inc.	
he new name must be distinguishable and c bbreviation "Corp." or "Inc." <u>"Company" o</u>		
. Enter new principal office address, if apprincipal office address <u>MUST BE A STREE</u>		
. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		
	<u></u>	
. If amending the registered agent and/or new registered agent and/or the new regi	registered office address in Floric	la, enter the name of t
. If amending the registered agent and/or	registered office address in Floric	la, enter the name of t
. If amending the registered agent and/or new registered agent and/or the new regi	registered office address in Floric	
. If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office address in Floricistered office address:	

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
(attach a		(Be specific) on shall be National Association	
	the board of directors.	e state chapters that meet Gui	delines
			<u>. </u>
			
			· · ·
			
			_

The date of each amendment(s) adoption: <u>03/10/2011</u>
	(date of adoption is required)
Effective date <u>if applicable</u> : _	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or me adopted by the board of direct	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated_3/10/2	011
Signature	har De
have	ne charman 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, o court appointed fiduciary by that fiduciary)
	Joe F. Solsona
	(Typed or printed name of person signing)
	Director
	(Title of person signing)

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