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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Broward	d Politic	al Ac	tion Committee
DOCUMENT NUMBER:	N	140000	0449)6
The enclosed Articles of Amenda	nent and fee are sub	mitted for filing	ζ.	
Please return all correspondence of	concerning this matt	er to the followi	ing:	
	Waren	ce Mae	Smit	th
		(Name of Con	tact Person)
		(Firm) / C-		
		(Firm/ Co		
	951 N	W 33rd	Way	
		(Addre	ess)	· · · · · · · · · · · · · · · · · · ·
	Laude	rhill, FL	333	11
4-16	· · · · · · · · · · · · · · · · · · ·	(City/ State and	d Zip Code)
	catingthe			
E-mail	address: (to be used	l for future annu	ial report n	otification)
For further information concerning	g this matter, please	call:		
Warence Mae	Smith	at (954	279-3406
(Name of Contact	Person)			de & Daytime Telephone Number)
Enclosed is a check for the follow	ing amount made pa	yable to the Flo	orida Depai	tment of State:
	43.75 Filing Fee & ertificate of Status	S43.75 Filing Certified Co (Additional of enclosed)	- py	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
<u>Mailing Addre</u> Amendment Sec	_		Street /	Address nent Section

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

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

Articles of Amendment to Articles of Incorporation of

14 JUL -7 PK 12: 07

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Broward Politic	cal Action Co	ommittee), Inc.	·[9
			talic Alass	
N	1140000044	96	•	
(Document	Number of Corporation	(if known)		
Pursuant to the provisions of section 617.1006, I mendment(s) to its Articles of Incorporation:	Florida Statutes, this Fla	rida Not For Pro	ofit Corporation ado	opts the followi
A. If amending name, enter the new name of	the corporation:			
Broward Political	Awareness	Associa	ition, Inc.	The ne
name must be distinguishable and contain the w "Company" or "Co." may not be used in the na	ord "corporation" or "			
3. Enter new principal office address, if appl	licable:			
Principal office address <u>MUST BE A STREE</u>				
				
C. Enter new malling address, if applicable:				
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>			

		The state of the s		
 If amending the registered agent and/or re new registered agent and/or the new regis 		in Florida, ente	r the name of the	
Name of New Registered Agent:				
	(Florida stre		<u></u>	
New Registered Office Address:	(Fibritia stre	ei aduress)		
			_, Florida	
	(City)			p Code)
ew Registered Agent's Signature, if changin	a Donictored Agents			
hereby accept the appointment as registered ag	gent. I am familiar with	and accept the c	obligations of the po	sition.
Sign	nature of New Registered	Agent, if changi	ing	

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: X Change X Remove X Add	PT John I V Mike SV Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	_M_	Robert Stone	951 NW 33rd Way
Add			Lauderhill, FL 33311
X			
2) Change			-
Add			**************************************
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Article (attach additional sheets, if necessary).	les, enter change(s) here: (Be specific)
EIN 46-5629593	
The Way	

The date of each,amendment(s) adoption:	//1/2014	, if other than the
late this document was signed. Effective date <u>if applicable</u> :	7/1/2014	
(no r	more than 90 days after amendment file date)	
Adoption of Amendment(s) (CF	IECK ONE)	
The amendment(s) was/were adopted by the was/were sufficient for approval.	ne members and the number of votes cast for the amendment(s)	
There are no members or members entitled adopted by the board of directors.	to vote on the amendment(s). The amendment(s) was/were	
Dated7/3/201	4	
Signature Mae	- Smith	
have not been selected,	e chairman of the board, president or other officer-if directors by an incorporator – if in the hands of a receiver, trustee, or iduciary by that fiduciary)	
Warer	nce Mae Smith	
(Typed or	printed name of person signing)	
	Chair	
	(Title of person signing)	