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Amendas Madilla

## **COVER LETTER**

TO: Amendr Division	ment Section n of Corporations
SUBJECT:	National Seniors Benevolent Association, Inc.
	Name of Corporation
DOCUMENT N	NUMBER: N25662
- The enclosed Sta	element of Change of Registered Office/Agent and fee are submitted for filling.
Please return all	correspondence concerning this matter to the following:
	Franklin J. Burr
	Name of Contact Person
	National Seniors Benevolent Association, Inc.
	Firm/Company
	P.O. Box 5014
	Address
	Clearwater, FL 33758
•	City/State and Zip Code
	· N/A
<b>:</b>	E-mail address: (to be used for future annual report notification)
For further infor	mation concerning this matter, please call:
Franklin J	Rune of Contact Person at ( 727 ) 734-8579 Area Code & Daytime Telephone Number
1	Area Code & Daytime Telephone Number
Enclosed is a \$3	5.00 check made payable to the Department of State.
,	Mailing Address: Stunet Address:
	Mailing Address: Street Address: Amendment Section Amendment Section
1	Division of Corporations Division of Corporations
, , , , , , , , , , , , , , , , , , ,	P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

CR2E045 (8/05)



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 20, 2012

FRANKLIN J. BURR
NATIONAL SENIORS BENEVOLENT ASSOCIATION
P.O. BOX 5014
CLEARWATER, FL 33758

SUBJECT: NATIONAL SENIORS BENEVOLENT ASSOCIATION, INC.

Ref. Number: N25662

We have received your document for NATIONAL SENIORS BENEVOLENT ASSOCIATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 712A00001459

PECENTED 12 FEB - 1 AM 8:

## Articles of Amendment to, Articles of Incorporation of

National Seniors Benevolent Asso		_
. (Name of Corporation as currently filed with the Flo	rida Dept. of State)	
N25662		_
(Document Number of Corpora	ation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the	following
A. If amending name, enter the new name of the corporati	on:	
N/A?		The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		-
:		-
		- <b></b> 堂
C. Enter new mailing address, if applicable:		2 × 50 m
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
· •		- PA
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D. If amending the registered agent and/or registered office		OFFSTATE ORPORATION
new registered agent and/or the new registered office a	·	* SS
Name of New Registered Agent: Jawdet	I. Rubaii, Esquire	
1358 S.	Missouri Avenue	
	(Florida street uddress)	
New Registered Office Address:		
! Clearwa	, Florida	
: (City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent. I am	th and accept the obligations of the position.	
1 Description		
Signature of New Regist	tered Agent, if changing	
<i>[</i> ]	Page 1 of 4	

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		ın <u>Doe</u>	
X Remove	ì	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u> Title</u>	Name	<u>Addres</u> s
Change Add Remove			
2) Change Add X Remove	VTD	Gregory Tintzel	3048 Eastland Blvd. C-105 Clearwater, FL 33761
3) Change Add Remove	VTD	Christopher Howell	1861 Saddle Hill Road, S. Dunedin, FL 34698
4) Change X_ Add Remove	<b>D</b>	Stewart Silverman	885 Berkley Court North Palm Harbor, FL 34684
Change Add Remove	†	<u> </u>	
Change Add Remove	?		

. If amending or adding additional As (attach additional sheets, if necessary).	rticles, enter change(s) here: (Re specific)
(under duational sheets, y necessary).	N/A
	N/A
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The date of each amendment(s) a	adoption: 3/3/2
Effective date if applicable:	1-3-12
•	(no more than 90 days after amendment file date)
:	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a was/were sufficient for approx	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or men adopted by the board of direc	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated Signature	Prince
(By the cha	hirman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
<u> </u>	in J. Burr
	(Typed or printed name of person signing)
PD	
<del></del>	(Title of person signing)