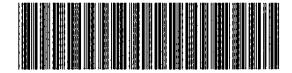


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| estor's Name | • |
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RETARY OF STATE
ON OF CORPORATIONS

COVER LETTER

| · • | |
|--------------------------------------------------------------------------------------------|-----------------|
| TO: Amendment Section Division of Corporations | |
| SUBJECT: Seniors Civil Liberties Association Inc. | |
| Name of Corporation | |
| DOCUMENT NUMBER: N31318 | |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fili | ng) |
| Please return all correspondence concerning this matter to the following: | |
| Franklin J. Burr | |
| Name of Contact Person | |
| Seniors Civil Liberties Association, Inc. | |
| Firm/Company | |
| ; | |
| P.O. Box 5014 | |
| Address Clearwater 33758 | |
| XXXXXXXXX, FL 34698 | , |
| City/State and Zip Code | |
| N/A | |
| E-mail address: (to be used for future annual report notification) | |
| | |
| For further information concerning this matter, please call: | |
| Franklin J: Burrat (727) 734-8579 | |
| Franklin J. Burr at (727) 734-8579 Name of Contact Person Area Code & Daytime Telepho | one Number |
| Enclosed is a \$35:00 check made payable to the Department of State. | |
| | |
| Mailing Address: Street Address: Amendment Section Amendment Section | |
| Division of Corporations Division of Corporations | ; |
| P.O. Box 6327 Clifton Building | |
| Tallahassee, FL 32314 2661 Executive Center C | Circle |
| Tallahassee, FL 32301 | |

CR2E045 (8/05) ...



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 20, 2012

FRANKLIN J. BURR SENIORS CIVIL LIBERTIES ASSOCIATION P.O. BOX 5014 CLEARWATER, FL 33758

SUBJECT: SENIORS CIVIL LIBERTIES ASSOCIATION, INC.

Ref. Number: N31318

We have received your document for SENIORS CIVIL LIBERTIES 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: 112A00001460

Articles of Amendment to Articles of Incorporation of

| Seniors Civil Libertie | es Associatio | on, Inc. | | |
|--------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------|--------------------------|------------------------------|
| (Name of Corporation as currently | filed with the Flo | rida Dept. of State) | | _ |
| N31318 | | · | | |
| (Document N | Number of Corpora | ntion (if known) | | _ |
| Pursuant to the provisions of section 617.10 amendment(s) to its Articles of Incorporation | 06, Florida Statute n: | s, this Florida Not For Profit | Corporation adopts th | e following |
| A. If amending name, enter the new name | e of the corporati | on: | | |
| N/A [‡] | | | | The new |
| name must be distinguishable and contain the "Company" or "Co." may not be used in the | | ion" or "incorporated" or the | abbreviation "Corp." | |
| B. Enter new principal office address, if a | applicable: | N/A | | # OF |
| (Principal office address MUST BE A STR | | | | |
| 7 | | | | |
| ij | | | | 53 |
| C. Enter new mailing address, if applical | hte• | | · | PH XX |
| (Mailing address <u>MAY BE A POST OF</u> | | N/A | | _ ယ္ သိုင္တ |
| : | | | | OF CORPORATIONS - PM 3: 34 |
| i. | | | | - - - |
| ł | | | | - |
| D. If amending the registered agent and/o new registered agent and/or the new re | or registered offic egistered office ac | e address in Florida, enter th Idress: | e name of the | |
| Name of New Registered Agent: | Jawdet ⊕ I. | Rubaii, Esquire | <u> </u> | |
| ; | • | ssouri Avenue | | |
| · | | Florida street address) | | |
| New Registered Office Address: | | | | |
| ., | Clearwater | , FI | orida33756 | |
| : | (City) | t | (Zip Code) | |
| New Registered Agent's Signature, if chan | nging Registered A | Agent: | | |
| I hereby accept the appointment as registere | d agent./1 am fan | niliar with and accept the oblig | rations of the position. | • |
| | ASIC | | | |
| Signat | ture of New Registo | ered Agent, if changing | | |
| (; | P | age 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 | <u>P</u> T <u>Johr</u> | Doe | |
|------------------------------------|----------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------|
| X Remove | $\underline{\underline{V}}$ <u>Mik</u> | Jones | |
| _X Add | <u>SV</u> <u>Sall</u> y | 2 Smith | • |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change Add X_ Remove |) Janet | Masching | 174 Arbor Drive W. Palm Harbor, FL 34683 |
| 2) Change Add X Remove S) Change | D VTD | Gregory Kintzel Christopher Howell | 3048 Eastland Blvd., Suite C-104 Clearwater, FL 33761 1861 Saddle Hill Road, S. |
| X Add Remove 4) Change Add Remove |) <u>: D</u> : | Stewart Silverman | Dunedin, FL 34698 885 Berkley Court N. Palm Harbor, FL 34684 |
| 5) Change Add Remove | · · · · · · · · · · · · · · · · · · · | 7.2. | |
| 6) Change Add Remove | <u>.</u> | • | |

| E. | If amending or adding addit | ional Art | ticles, enter change(s) here: |
|----|---------------------------------------------------------------|---------------------------------------|-------------------------------|
| | If amending or adding addit (attach additional sheets, if ned | cessary). | (Be specific) |
| | ; | N/A | |
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| The date of each amendment(s) ad | option: |
|-------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Effective date if applicable: | 1-3-12 |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) |
| The amendment(s) was/were ad was/were sufficient for approva | opted by the members and the number of votes cast for the amendment(s) 1. |
| There are no members or membadopted by the board of directo Dated Signature | pers entitled to vote on the amendment(s). The amendment(s) was/were rs. |
| (By the chair) have not bee | man or vice chairman of the board, president or other officer-if directors on selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary) |
| Frankl | in J. Burr |
| | (Typed or printed name of person signing) |
| PD | |
| • | (Title of person signing) |