N43974

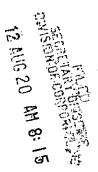
(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				
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07/31/12--01010--004 **35.00



Amend 851/12



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 1, 2012

COREY HINDS
CENTER FOR INDEPENDENT LIVING
4800 N STATE ROAD 7 #F102
FORT LAUDERDALE, FL 33319

SUBJECT: CENTER FOR INDEPENDENT LIVING OF BROWARD, INC.

Ref. Number: N43974

We have received your document for CENTER FOR INDEPENDENT LIVING OF BROWARD, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please remove the title (Ex. Director) from the new registered agent's name. This form is to change the registered agent information only. If youwish to add an officer file the enclosed amendment to do so.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 712A00020082

Articles of Amendment to Articles of Incorporation of



Center for Independent Living of Broward, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N43974 (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: 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: Corey Hinds Name of New Registered Agent: 4800 N State Road 7, F102 (Florida street address) New Registered Office Address: Fort Lauderdale (City) (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.

Page 1 of 4

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: X Change X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
1) Change	CFO	Richard Murray	4800 N State Rd 7, F102		
Add XX Remove			Fort Lauderdale, FL 33319		
2) Change	CEO	Corey Hinds	4800 N State Rd 7, F102		
XX Add	-		Fort Lauderdale, FL 33319		
Remove					
3) Change					
Add					
Remove					
4) Change	***************************************				
Add		•			
Remove					
5) Change		•			
Add					
Remove					
6) Change			•		
Add		- NAME OF CO.			
Remove			No. 6-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2		

	E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
						
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The date of each amendment(s) adoption: U3/28/2012					
Effective date if applicable:	08/10/2012				
 -	(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) aproval.				
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.				
Dated 08/	10/2012				
have n	chairman or vice chairman of the board, president or other officer-if directors ot been selected, by an incorporator – if in the hands of a receiver, trustec, or court appointed fiduciary by that fiduciary)				
Craig L	ilienthal				
	(Typed or printed name of person signing)				
Preside	ent_				
	(Title of person signing)				