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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATIO	American Veterans P	ost 86, Inc.		
	116060			
DOCUMENT NUMBER: _				
The enclosed Articles of Ame	endment and fee are subn	nitted for filing.		
Please return all corresponder	nce concerning this matte	er to the following:		
Lori Nava				
		(Name of Contact Pe	erson)	
American Veterans Post 86,	Inc.			
		(Firm/ Company	<u>()</u>	
6685 Brooklyn Bay Rd				
		(Address)		
Keystone Heights, Fl. 32656				
		(City/ State and Zip	Code)	
amvetspost86@att.net				
E-	mail address: (to be used	for future annual rep	port notification	<u></u>
For further information conce	erning this matter, please	call:		
Lori Nave		at	352 473 7951	
(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pa	ayable to the Florida	Department of	State:
\$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A Amendme		Aı	reet Address mendment Sect	ion

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



July 23, 2025

LORI NAVA 6685 BROOKLYN BAY ROAD KEYSTONE HEIGHTS, FL 32656

SUBJECT: AMERICAN VETERANS POST 86, INC.

Ref. Number: N16060

We have received your document for AMERICAN VETERANS POST 86, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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.

Letter Number: 325A00016152

Claretha Golden Regulatory Specialist II

Articles of Amendment to Articles of Incorporation of

' American Veterans Post 86, Inc.

(Name of Corporation as currently filed with the	Florida D	ept. of State)	
N16060			,
(Docum	ent Numbo	er of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida No</i>	ot 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 "Company" or "Co." may not be used in the name	"corporat	ion" or "incorpoi	rated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	ble:	N/A	
(Principal office address MUST BE A STREET A	DDRESS)		
		 	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>B<i>OX</i></u>)	N/A	
			
D. If amending the registered agent and/or regis	stered offic	e address in Flor	rida, enter the name of the
new registered agent and/or the new register		laress:	
Name of New Registered Agent:	N/A		
New Registered Office Address:			(Florida street address)
<u></u>	N/A		
		(City)	, Florida (Zip Code)
			(sap court)
New Registered Agent's Signature, if changing For I hereby accept the appointment as registered agent	<u>Registered</u> t. I am fan	Agent: niliar with and ac	cept the obligations of the position.
•	-		
_			
	Sis	enature of New Ro	egistered 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 Do V Mike Jo SV Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>P</u>	John Givens	6014 Lazy Ln. Keystone Heights ,Fl 32656
x Remove			
2) Change × Add	<u>P</u>	Mark Alexander	5865 Sequoia Rd. Keystone Heights ,Fl 32656
Remove 3) Remove Add x Remove	<u>CFO</u>	Ronald Wokosly	744 ST.Rd. 26 E. Melrose , FI 32666
4) Change Add	CFO	Joan Alexander	5865 Sequoia Rd. Keystone Heights Fl 32656
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
	 ,		

	 <u> </u>	
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document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
. •	Dated 5/21/25 Signature Jan 7 V. Albumble
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Topo V. Alexander (Typed or printed name of person signing)
	Timane Office (Title of person signing)

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