N17000010161

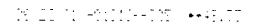
(Requestor's Name)
(Address)
,

(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300368357153



2021 JUN 22 MM 7: 41

Mind

JUL 21 2021

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	St. Michael's Legion	ne Inc				
N'I	7000010161					
DOCUMENT NUMBER:					<u>. </u>	
The enclosed Articles of Amend	Iment and fee are sub	mitted for filing.				
Please return all correspondence	concerning this matt	er to the following	;			
Chad R McCurdy						
		(Name of Contact	Person)		<u> </u>	
		(Firm/ Comp.	any)			
1255 Florida Ave S, Unit F						
		(Address))			
Rockledge, Florida 32955						
		(City/ State and Z	ip Code)		<u></u>	
cmccurdy1969@yahoo.com						
E-ma	ill address: (to be used	d for future annual	report not	ification	<u> </u>	
For further information concern	ing this matter, please	e call:				
Chad R McCurdy			321 at		586-7019	
(Na	me of Contact Persor	1)		Code)	(Daytime Telephone Numbe	τ)
Enclosed is a check for the follo	wing amount made p	ayable to the Florid	la Departi	nent of	State:	
□ \$35 Filing Fee ■	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional cop enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Add	ress		Street Ad	dress		

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

Articles of Amendment to Articles of Incorporation of

St. Michael's Legione Inc.		
Name of Corporation as currently filed with the Florida I	Dept. of State)	
N17000010161		
(Document Numb	er of Corporation (i	f known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
		The new
name must be distinguishable and contain the word "corporal "Company" or "Co." may not be used in the name	tion" or "incorpore	ited" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	021
		1021 JUH 22
		22
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
<u> </u>		
		<u> </u>
D. If amending the registered agent and/or registered office		da, enter the name of the
new registered agent and/or the new registered office a	<u>ddress:</u>	
Name of New Registered Agent:		
New Registered Office Address:		(Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fai		ept the obligations of the position.
<u> </u>		
Si	gnature of New Rey	gistered 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 Si	ones .	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add	SDCEO	Chad McCurdy	314 Adams Cape Canaveral, Fl 32920
Remove 2) Change Add	<u>TR</u>	Michael Peacock	3935 N US Highway 1, Unit D Cocoa, Fl 32926
Remove Change Add Remove	TR	Michael Comerford	3935 N US Highway 1, Unit D Cocoa, Fl 32926
4) Change Add	TR	Orlando Portillo	3935 N US Highway 1, Unit D Cocoa, Fl 32926
Remove 5) Change	TR	Louis Forte	3935 N US Highway 1, Unit D Cocoa, Fl 32926
Remove 6) Change × Add	TR	Larry Lanier	3935 N US Highway 1, Unit D Coçoa, Fl 32926
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
		tees are permanant postions. A Board of Adv	
		ard of Trustees, and Board of Advisors. The	
Board of Advisors.			

					
		<u> </u>		···	
					
					<u></u>
		·			
-					
	<u> </u>				
					
The date of each amendment date this document was signed.	(s) adoption:			·	if other than the
Effective date if applicable:	16 Jun 2021				
Enterior date in applicable.	(no more th	han 90 days after ame	endment file date)	****	
Note: If the date inserted in the document's effective date on the			ry filing requirements,	this date will not be	listed as the
Adoption of Amendment(s)	(<u>CHECK</u>	ONE)			
☐ The amendment(s) was/w was/were sufficient for ap		mbers and the number	of votes east for the a	mendment(s)	

here are no mem dopted by the be	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	16 June 2021
Signatu	(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)
	Chad R McCurdy
	(Typed or printed name of person signing)
	SD/CEO
	(Title of person signing)

And the second second