108980

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:			ENT AND PROTECTIVE OF
708980 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are s	submitted for filing.		
Please return all correspondence concerning this m	atter to the following	:	
Karen Arnold			
	(Name of Contac	(Person)	
HOLIDAY ISLES LODGE NO.1912 INC., BENI	EVOLENT AND PRO	OTECTIVE ORD	ER
	(Firm/ Comp	any)	
BPO Elks #1912 14111 E Parsley Drive Box 8066	5		
	(Address)	
Madeira Beach, FL 33708			
	(City/ State and Z	ip Code)	
elkstreas@gmail.com			
E-mail address: (to be u	ised for future annual	report notification	n)
For further information concerning this matter, ple	ase call:		
Karen Arnold		727 at	392-4176
(Name of Contact Per	son)	(Area Code)	(Daytime Telephone Numbe
Enclosed is a check for the following amount made	e payable to the Florid	la Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	& □\$43.75 Filing I us — Certified Copy (Additional copenclosed)	Certif by is Certif	0 Filing Fee Teate of Status Ted Copy tional Copy is osed)
Mailing Address Amendment Section		Street Address Amendment Sect	
Division of Corporations		Division of Corp-	orations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

Articles of Amendment to

Articles of Incorporation of



HOLIDAY ISLES LODGE NO. 1912 INC., BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA.

(Name of Corporation as currer	tly filed with the Florida Dept. of State)
708980	
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statutumendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the fol
A. If amending name, enter the new name of the corporat	ion:
name must be distinguishable and contain the word "corpora "Company" or "Co," may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered offi	
new registered agent and/or the new registered office : Bernard	
Name of New Registered Agent:	Gordon
	Same
New Registered Office Address:	(Florida street address)
New Registered Office Address.	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I un fo	MULA : Descript the obligations of the position.
—/- 	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 taddress 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; C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Sec	Sue Patzschke	BPO Elks
Add			14111 E Parsley Drive Box 8
X Remove			Madeira Beach, FL 33708
2) Change	Sec	Bernard Gordon	BPO Elks
X Add			14111 E Parsley Drive Box 8
Remove			Madeira Beach, FL 33708
3) Change	Treas	Karen Amold	BPO Elks
X			14111 E Parsley Drive Box 8
Add			Madeira Beach, FL 33708
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			

If amending or adding adding adding additional sheets, if	necessary), (Be	specific)	- -			
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	date of each amendment(s) adoption:
Effe	ective date if applicable:
	(no more than 90 days after amendment file date)
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be little timent's effective date on the Department of State's records.
Ado	option 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 $\frac{9/9/19}{}$
	Signature Rhonda Anith
	(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)
	Rhonda Smith
	(Typed or printed name of person signing)
	CEO, Exalted Ruler
	(Title of person signing)