

713544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

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2024 JUN 12 PM 3:30

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Golden triangle Post no 8087 VFW
Name of Corporation

DOCUMENT NUMBER: 713544

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Douglas C. Begeot
Name of Contact Person

VFW Post 8087
Firm/Company

4065 N Hwy 19A
Address

Mount Dora, FL 32757
City/State and Zip Code

~~do~~ dougbegeot@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas C. Begeot at (352) 602-5397
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GOLDEN TRIANGLE POST NO. 8087 VETERANS OF FOREIGN
2. The principal office address: 4065 N Hwy 19A, Mount Dora ^{LOADS OF THE} FL, 32757 ^{UNITED} ^{STATE}
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/27/67 Document number: 713544
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Larry Hutchison END OF OFFICE
4065 N Hwy 19A
Mount Dora FL 32757

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Douglas Begeot
4065 N Hwy 19A
Mount Dora FL 32757

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

Larry Hutchison
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Douglas C Begeot
Signature of Registered Agent

5-31-2024
Date

If signing on behalf of an entity:

Douglas C. Begeot
Typed or Printed Name

*** FILING FEE: \$35.00 ***