## 713653

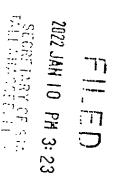
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

The American Legion, NO-VEL Post #159, Inc. NAME OF CORPORATION:	<b>c</b>
713683 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Ann-Marie Weldon	
(Name of Contact Person)	)
The American Legion, NO-VEL #159, Inc	
(Firm/ Company)	
1770 E Venice Avenue	
(Address)	
Venice, FL 34292	
(City/ State and Zip Code	)
administration@novelpost159.org	
E-mail address: (to be used for future annual report n	otification)
For further information concerning this matter, please call:	
Ann-Marie Weldon 941	488-1157
	a Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Depar	rtment of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ Certificate of Status	1\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

**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

## Articles of Amendment to Articles of Incorporation of

FILED

2022 JAN 10 PH 3: 23

The American Legion, NO-VEL Post #159, Inc

SECRETARY OF STATE

Name of Corporation as currently filed with th	e Florida Dept.	of State)	
713683			
(Docur	nent Number of	Corporation (if known)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statutes, th	is Florida Not For Prof	it Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:		
		**	The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		' or "incorporated" or ti	ne abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica		<u> </u>	
(Principal office address <u>MUST BE A STREET</u> A	<u>ADDRESS</u> )		
C. Enter new mailing address, if applicable:	DOV)		
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>BUX</u> )		
		<del> </del>	<u> </u>
D. If amending the registered agent and/or regi	istered office ac	ldress in Florida, enter	the name of the
new registered agent and/or the new register			
Name of New Registered Agent:	Ann-Marie W	eldon	
	4438 Via Del	Villetti Drive	
		(Florida st	reet address)
New Registered Office Address			
	Venice		, Florida
	(0	City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Age	nt: ir with and accept the ob	ligations of the position.
		Ma	7. 00.
	em Signa	ure of New Registered A	gant if changing
	Signai	ure oj ivew Kegisterea A	дели, и спилуту

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 Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	Commat	Howard Van Nostrand	Venice, FL 34292
xx Remove			
2) Change Add	Commar	Terry Perkins	214 Ponce del Leone Venice, FL 34285
Remove 3) Remove Add Remove	1st Vice	Peter Skentzos	Nokomis, FL 34275
4) Change Add	1st Vice	Don MacLean	2525 Buckskin Drive Englewood, FL 34223
Remove  5) Change Add  ×× Remove	<u>Adjutant</u>	Terry Perkins	214 Ponce del Leone Venice, FL 34285
6) Change	<u>Adjutant</u>	Angelo "Skip" Felicita	6931 Willow Creek Circle Apt 105 North Port, FL 34287
Remove  E. If amending or addir	ng additional Arti	icles, enter change(s) here:	
(attach additional shee	nts, if necessary).	(Be specific)	
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The date of each amendment(s) adoptidate this document was signed.	on:			, if other than the
Effective date if applicable:  January 1	, 2022			
Effective date <u>if applicable</u> :	(no more than 90 day	s after amendment file de	ate)	
Note: If the date inserted in this block d	oes not meet the application	able statutory filing requi	irements, this date will no	t be listed as the

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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.

D	12/28/21
Dated	
Signatur	Thigh Tile
	(By the Mairman 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)
	Angelo Felicita
	Angelo Felicita (Typed or printed name of person signing)