717549

(Re	equestor's Name)	
(Ad	Idress)	
. (Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

FLORIDA PANHAN	NDLE GEM & MINE	FRAL SOCIE	TY, INC
7175 4 9			
DOCUMENT NUMBER:	.		
The enclosed Articles of Amendment and fee are sub-	nitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
TWANA B. SPEAR			
	(Name of Contact Po	erson)	<u> </u>
	(Firm/ Company	[,])	
9021 WOODRUN LANE			
	(Address)		
PENSACOLA, FL 32514			
	(City/ State and Zip	Code)	-
TWANABS2015@GMAIL.COM			
E-mail address: (to be used	for future annual rep	ort notification	n)
For further information concerning this matter, please	call:		
TWANA SPEAR	at	850	375-5531
(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida [Department of	State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	_	Certif s Certif	0 Filing Fee ficate of Status fied Copy tional Copy is ssed)
Mailing Address Amendment Section		reet Address nendment Sect	ion

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FLORIDA PANHANDLE GEM & MINERAL SOCIETY, INC.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
717549		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute unendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the fo	ollowing
A. If amending name, enter the new name of the corporati	ion:	
	1	The new
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.		
3. Enter new principal office address, if applicable:	9021 WOODRUN LANE	
(Principal office address MUST BE A STREET ADDRESS	PENSACOLA, FL 32514	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	9021 WOODRUN LANE	
	PENSACOLA, FL 32514	
	<u> </u>	
If amending the registered agent and/or registered offic new registered agent and/or the new registered office a		130 6
Name of New Registered Agent:		-7
	. . ·	
New Registered Office Address:	(Florida street address)	6:5
	, Florida	
	(City) (Zip Code)	
iew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fair		
	gnature 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 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	<u>V</u> <u>Mik</u>	n <u>Doc</u> te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Т	SHAW, PHILLIP E.	5168 TEAKWOOD DR
Add X Remove			PENSACOLA, FL 32506
2) Change	Т	SPEAR, TWANA B.	9021 WOODRUN LANE
X Add			PENSACOLA, FL 32514
Remove 3) Change	VP	SCHURTE, PAUL	3020 MYRSHINE DR.
Add X Remove			PENSACOLA, FL 32505
4) Change	<u>VP</u>	NESTOR, ROBIN	5203 ROSEWOOD CREEK DR.
X Add			PACE, FL 32517
5) Change		· *	
Add			57
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here (attach additional sheets, if necessary). (Be specific)	
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/	
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	-7 P
	19 0C - 7 AM 8: 8

	e date of each amendment(s) adoption:	, if other than the
Eff	ective date if applicable:	
	(no more than 90 days after amendment file date)	N-1
No:	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not sument's effective date on the Department of State's records.	be listed as the
۱d	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 10 05 2019	
	Signature (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)	_
	Twana B. Speak (Typed or printed name of person signing)	
	(Title of person signing)	
		19 OC