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Amend + M/C

Brown 4-25-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Spring Hill Ch	apter #1026 of Americ	an Association of E
DOCUMENT NUM	BER: 723641		
The enclosed Article	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	Steven	J. Zeledon, II	
	(Name of	Contact Person)	
	(Firm	n/ Company)	· · ·
	32270 M	archmont Circle	
	(.	Address)	र्वा का है
	Ridge Mand	or, FL 33523-9025	
	(City/ Sta	te and Zip Code)	
		on@earthlink.net d for future annual report notif	ication)
For further information	on concerning this matter, pleas	e call:	
Steven J. Zeledo	n, II	at (352) 442-12	271
(Name	of Contact Person)	(Area Code & Day	time Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departme	ent of State:
□\$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corpora Clifton Building	tions
* . * .	hassee, FL 32314	2661 Executive Cen Tallahassee, FL 323	

Articles of Amendment to Articles of Incorporation of

Spring Hill Chapter #1026 of American Association of Retired Persons, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

	23641	-
(Document Numb	er of Corporat	ion (if known)
Pursuant to the provisions of section 617.1006, F the following amendment(s) to its Articles of Inco		, this Florida Not For Profit Corporation adopts
A. If amending name, enter the new name of t	he corporatio	<u>n:</u>
Hernando County Eas	st AARP Cha	apter #1026, Inc.
The new name must be distinguishable and con abbreviation "Corp." or "Inc." <u>"Company" or</u>		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	cable:	18913 Quarter Horse Lane
		Spring Hill, FL 34610-2177
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E <i>BOX</i></u>)	32270 Marchmont Circle Ridge Manor, FL 33523-9025
D. If amending the registered agent and/or renew registered agent and/or the new registered.		
Name of New Registered Agent:	Steve	n J. Zeledon, II
	32270 N	Marchmont Circle
New Registered Office Address:	: (Florida street address)	
_	Ridge Man	or, FL 33523-9025 , Florida
_		(City) (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a		gent: familiar with and gccept the obligations of the
position.	- Or	
Sig	nature of New	Registered Agent, if changing

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add ☐ Remove
E. If amer (attach	nding or adding additional Artic additional sheets, if necessary).	les, enter change(s) here: (Be specific)	
	,		
-			

The date of each amendment(s) adoption: January 1, 2011
`	(date of adoption is required)
Effective date if applicable:	m. ·
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or m adopted by the board of dire	embers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
Dated	4/4/11
(By 1 have	the chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Steven J. Zeledon, II
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)