

741502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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DATE 05-27-14 BY 11:23

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JUN - 9 2014

R. WHITE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 15, 2014

LOUIS MARTIN BARLOW  
11421 OSCEOLA  
NEW PORT RICHEY, FL 34654

SUBJECT: HUDSON AMERICAN LEGION POST 335, INC.  
Ref. Number: 741502

We have received your document for HUDSON AMERICAN LEGION POST 335, INC. and your check(s) totaling \$52.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The amounts on the check differ. Please either correct the check so that the amounts match or issue another check with the correct amounts in both places.(We are returning the check to you for correction.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 414A00010465

Articles of Amendment  
to  
Articles of Incorporation  
of

Hudson American Legion Post 335, Inc.

14 JUN -3 11:11:23

(Name of Corporation as currently filed with the Florida Dept. of State)

741502

DALLAS, TEXAS  
TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

N/A

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

N/A

N/A

N/A

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

N/A

N/A

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

Louis Martin Barlow

12535 Gurnee Ave

(Florida street address)

New Registered Office Address:

New Port Richey

(City)

, Florida 34654

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept 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 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>Finance</u>	<u>Richard Hebeck</u>	<u>11421 Osceola Aave</u> <u>New Port Richey, FL</u> <u>34654</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Adjutant</u>	<u>Tony Lynn Blair</u>	<u>13227 Parkwood St</u> <u>Hudson, FL</u> <u>34669</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>First VP</u>	<u>James Francis St Denis</u>	<u>8126 Sylvan Dr</u> <u>Hudson, FL</u> <u>34667</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CMDR</u>	<u>Louis Martin Barlow</u>	<u>12535 Gurnee Ave</u> <u>New Port Richey, FL</u> <u>34654</u>
5) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Thomas R Holbrook</u>	<u>15203 Teresa Blvd</u> <u>Hudson, FL</u> <u>34669</u>
6) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Accountant</u>	<u>Sharon Abookkee Price</u>	<u>9300 Ottawa St</u> <u>New Port Richey, FL</u> <u>34654</u>

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

N/A

The date of each amendment(s) adoption: 05/02/2014, if other than the date this document was signed.

Effective date if applicable: 05/02/2014  
(no more than 90 days after amendment file date)

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.
- ☐ 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 05/02/2014

Signature Louis M Barlow  
(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)

Louis Martin Barlow

(Typed or printed name of person signing)

Commander

(Title of person signing)