750488

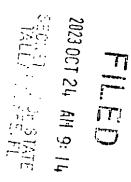
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A. BUTLER NOV - 6 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	npkins Post 2380 Veterans of Foreign Wars of the United States, Inc.
750488 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee ar	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Tony Gall	
	(Name of Contact Person)
VFW Post 2380	
	(Firm/ Company)
510 S Alabama Ave	
	(Address)
DeLand, Florida 32724	
	(City/ State and Zip Code)
post2380@vfwfl.org	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter,	please call:
Dianne Peek	(386) 717-5306 at
(Name of Contact F	Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of St	
Mailing Address	Street Address

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

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

Dickinson-Tompkins Post 2380 Veterans of Foreign Wars of the United States, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 750488 (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: Richard H. Criche Post 2380 Veterans of Foreign Wars of the United States, Inc. 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address: N/A _ Florida _ (Zip Code) (City) 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: X Change X Remove A Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title	Name	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			<u> </u>
6) Change Add			
Remove			
E. If amending or addir (attach additional shee	ng additional Arti	icles, enter change(s) here: (Be specific)	

	Contact there the
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(ne	more than 90 days after amendment file date)
Note: If the date inserted in this block does to document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be listed as the of State's records.
Adoption of Amendment(s)	CHECK ONE)
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes east for the amendment(s)

☐ 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 10/20/2023
Signature (By the chairman of rice 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)
(Typed or printed name of person signing)
Quarter master (Title of person signing)