752031

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COVER LETTER

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TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Dalla Lödge #1014 Layel Onder Mase Inc
DOCUMENT NUMBER: 152031 (2573084678 CC)
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Diana Johnson (Name of Contact Person)
Olala Lodge 1014 Logal Order of Moose Suc
10720 SE45+ Ave
(Address) Bellesien Fl 34420 (City/ State and Zip Code)
10dge1014de Mooseunits. Org E-mail address: (10 be used for future annual report notification)
For further information concerning this matter, please call:
Diana Johnson at <u>352 454 8409</u> (Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & Certificate of Status Certified Copy

Certified Copy (Additional copy is enclosed)

 Certificate of Status
py is 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

□\$52.50 Filing Fee

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Art	icles of Amendment	
	to	
Arti	cles of Incorporation	
Ocal, Loda # 1014 Las	al Order D Mon	SO FILED
(Name of Corporation as corrently filed with the Florid	la Dept. of State)	2023 OCT 27 PH 1:00
752031 (2573084	(678 CC)	FA 1:35
(Document Nu	mber of Corporation (if known)	THE DIATE
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Not For Prof</i> i	it Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
		The new
name must be distinguishable and contain the word "corport" "Company" or "Co." may not be used in the name.	oration or incorporatea or ti	te appresiation Corp. or The.
company of co. may not be asea in the name.		
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST RE A STREET ADDRE</u>	<u>SS</u>)	
	······	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		the name of the
new registered agent and/of the new registered only	<u>ce autress.</u>	
Name of New Registered Agent:		
	t blorida st	veet address)
New Registered Office Address:		
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	red Anent:	
<i>Thereby accept the appointment as registered agent. I an</i>		ligations of the position.
	~ · · · · · · · · · · · · · · · · · · ·	C

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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 John Doe V X Remove Mike Jones X Add sv Sally Smith Title Address Type of Action Name (Check One) Trusure Dolimini, Michee 1) ____ Change ___ Add __ Remove Ireasurer TAMMU W 16600 SE 950 2) ____ Change ____Add Remove 3) Change len:en _ Add __ Remove 108445 4) ____ Change Add Remove 557 SE II5) Change 34420 ___ Remove ۶) ____ 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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					<u>, </u>	
The date of each amendment(s) adoption:			-		, if other than	the

date this document was signed.

Effective date if applicable: __

(no more than 90 days after amendment file date)

<u>Note:</u> 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.

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

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)

0 (Typed or printed name of person signing)

U (Title of person signing)

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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 1, 2023

DIANE JOHNSON 10035 S. US HWY 441 BELLEVIEW, FL 34420

SUBJECT: OCALA LODGE NO. 1014, LOYAL ORDER OF MOOSE, INC. Ref. Number: 752031

We have received your document for OCALA LODGE NO. 1014, LOYAL ORDER OF MOOSE, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP, but your entity is a FLORIDA NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Anissa Butler Regulatory Specialist II

Letter Number: 123A00017212



November 1, 2023

DANA JOHNSON 10720 SE 45TH AVE BELLEVIEW, FL 34420

SUBJECT: OCALA LODGE NO. 1014, LOYAL ORDER OF MOOSE, INC. Ref. Number: 752031

We have received your document for OCALA LODGE NO. 1014, LOYAL ORDER OF MOOSE, INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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.

Morgan E Lovett Regulatory Specialist II

Letter Number: 223A00025385

OCT 27 2023

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752031

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Entity Name: OCALA LODGE NO. 1014, LOYAL ORDER OF MOOSE, INC.

Current Principal Place of Business:

10035 S. U.S. HWY 441 BELLEVIEW, FL 34420

Current Mailing Address:

PO BOX 1048 BELLEVIEW, FL 34421 US

FEI Number: 59-1106860

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

FILED Jan 17, 2023

Secretary of State

2573084678CC

Date

Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/	Director	Detail :

Title	ADMINISTRATOR	Title	Р
Name	JOHNSON, DIANA	Name	LASHINSKI, JERRY
Address	10720 SE 45TH AVE	Address	PO BOX 1048
City-State-Zip:	BELLEVIEW FL 34421		BELLEVIEW
		City-State-Zip:	BELLEVIEW FL 34421
Title	т		
Name	SOLIMINI, MICHAEL		
Address	PO BOX 1048 BELLEVIEW		

City-State-Zip: BELLEVIEW FL 34421

I hereby certily that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shell have the same legal effect as if made under oeth: that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Flonda Statutes, and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DIANA JOHNSON

ADMINISTRATOR

01/17/2023

Electronic Signature of Signing Officer/Director Detail

Date

DOCUMENT# 752031 Entity Name: OCALA LODGE NO. 1014, LOYAL ORDER OF MOOSE, INC.	Jan 17, 2023 Secretary of State
Current Principal Place of Business: 10035 S. U.S. HWY 441 BELLEVIEW, FL. 34420	2573084678CC
Current Mailing Address:	
PO BOX 1048 BELLEVIEW, FL 34421 US	
FEI Number: 59-1106860 Certific	cate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			Date
Title	ADMINISTRATOR	ĩıle	P	
Name	JOHNSON, DIANA	Name	· LASHINSKI, JERRY	
Address	10720 SE 45TH AVE	Address	PO BOX 1048	
City-State-Zip:	BELLEVIEW FL 34421		BELLEVIEW	
Title	T	City-State-Zip:	BELLEVIEW FL 34421	
Name	SOLIMINE MICHAEL			
Address	PO BOX 1048 BELLEVIEW			
City-State-Zip:	BELLEVIEW FL 34421			

Lifereby Centity that the information indicated on this report or suppermential report is true and accurate and that my electrum, signature shall have the same legal effect as if made under path, that I way an officer or director of the exploration or the receiver or itustee empowared to esecute this report as required by Chapter G17. Flanda Statutes, and that my name appears

SIGNATURE: DIANA JOHNSON

ADMINISTRATOR

01/17/2023

FILED

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 752031

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