## 758187

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300403491093

SECRETARY OF COMPANY

2023 FEB 27 AM 10: 30

brund

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI		HAEOLOGICAL SOCIE	ETY, INC.	<del></del>		-
DOCUMENT NUMBER:	758187			, ····································		~-
The enclosed Articles of An	nendment and fee are sub	mitted for filing.				
Please return all correspond	ence concerning this matte	er to the following:				
STEVEN L. WARREN						
	, i	(Name of Contact Persor	n)	·		
		(Firm/ Company)				
1531 CRESTWOOD LANI	Ė					
		(Address)				-
PALM HARBOR, FLORIC	OA 34683					
		(City/ State and Zip Code	<del>e</del> )			_
CIVILWARREN@YAHO	O.COM			258 VL	2023 F	14/31
I	e-mail address: (to be used	for future annual report	notification)	:- [T]	65	
For further information con-	cerning this matter, please	call:			27	- 14.
STEVE WARREN		at	7-787-1896	70	系	] - []
	(Name of Contact Person	) (Ar	ca Code) (Daytime Telep	phone Num	ben.	
Enclosed is a check for the	following amount made pa	ayable to the Florida Depa	artment of State:	171	Ü	
■ \$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
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

## Articles of Amendment to Articles of Incorporation of

WEST STATE ARCHAEOLOGICAL SOCIETY,	INC.	
(Name of Corporation as currently filed with the	Florida Dept. of State)	
758187		
(Docum	ent Number of Corporation (if kno-	תאי)
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this <i>Florida Not For I</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		
D. Enter your principal office address if applica	1531 CRESTWOOD L	ANE
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A	DDRESS) PALM HARBOR, FLO	DRIDA 34683
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	BOX) 1531 CRESTWOOD L PALM HARBOR, FLC	237
D. If amending the registered agent and/or regis		nter the name of the
new registered agent and/or the new registere		5
Name of New Registered Agent:	STEVEN L. WARREN	
	1531 CRESTWOOD LANE	- O O
New Registered Office Address:	(Flori	da street address)
	PALM HARBOR	, Florida 34683
	(City)	(Zip Code)
New Registered Agent's Signature, if changing R I herehy accept the appointment as registered agent		e oblightions of the position.
_	Signature of New Registers	ed 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:

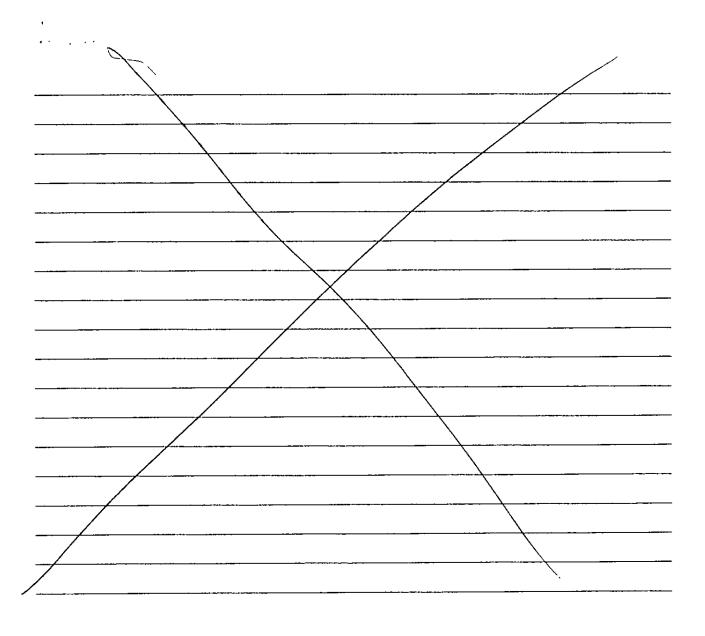
(Attach additional sheets, if necessary)

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	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	VP	тноме, лм '	4051 85th St North St Pete, FL 3370
X Remove  2) Change Add	BOARD	SCOGGINS, SAM	718 BELT CT TAMPA, FL 33012
x Remove Change Add x Remove	BOARD	MYERS, Jocelyn	5601 N. FLORIDA AVE. TAMPA, FL 33604
4) Change Add	TREAS	Vizzi, Joe Anthony	2516 Withy Ct Tampa, FL 33618
<ul> <li>X Remove</li> <li>5) Change</li> <li> Add</li> </ul>	PRES	Pressley, Keith	2282 Evangelina Ave Spring Hill, FL 34608
<ul> <li>X Remove</li> <li>6) Change</li> <li> Add</li> </ul>	BOARD	Lord, Ron	5305 Bolton Dr Zephyrhills, FL 33542
(attach additional shee	us, if necessary).	cles, enter change(s) here: (Be specific) , 4051 85th St North, St. Petersburg, Florida REN, 1531 Crestwood Lane, Palm Harbor, Fl	- <del>-</del>



The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	o more than 90 days after amendment file date)

Note: 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.

J	There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.
	Dated 2-22-2023 Signature	tver I Ware
	(By the chairn have not beer	nan or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)
	STEVEN	L. WARREN
		(Typed or printed name of person signing)
	Treasurer	
	<del> </del>	(Title of person signing)

1.5.65