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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	ican Legion Post no.1, Inc	-	
761981 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are			
Please return all correspondence concerning this	matter to the following:		
Leon H Flowers			
	(Name of Contact Pe	rsoa)	
American Legion Post 1			
	(Firm/ Company	<i>'</i>)	· · · · · · · · · · · · · · · · · · ·
1281 N Hwy US I			
	(Address)	······	
Titusvitle, Florida 32796			
	(City: State and Zip	Code)	
alegionpost1@hotmail.comn			
E-mail address: (to be	used for future annual rep	ort notificatio	n)
For further information concerning this matter, pl	ease call:		
Leon H Flowers	at	407	416-1632T
(Name of Contact Pe	rson)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	de payable to the Florida l	Department of	State:
\$35 Filing Fee		Certif s Certif	0 Filing Fee fente of Status fed Copy tional Copy is used)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Di	reet Address nendment Sectivision of Corpo e Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Titusville American Legion Post no. 1, Inc		
(Name of Corporation as currently filed with the Flo	rida Dept, of State)	
59-0937826		
(Document)	Number of Corporation (1)	known)
Pursuant to the provisions of section 617,1006, Florida 5 amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not i</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
name must be distinguishable and contain the word "co. "Company" or "Co." may not be used in the name.	rporation" or "incorporat	The newThe new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u>RESS</u>)	
C. Enter new mailing address, if applicable: (Mailing uddress MAY BE A POST OFFICE BOX	· · · · · · · · · · · · · · · · · · ·	2021 DEO -1
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		ထ la, enter the name of the
Name of New Registered Agent:	nce address.	.,
New Registered Office Address:		Fiorala street address)
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. It		ot the obligations of the position.
	Signature of New Regi	stered 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 = Fresident; 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	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Acdres</u> s
1) Change Add	Executiv	Wanda Moore	1281 N.Hwy US 1 Titusville, Florida 32796
21 Remove 21 Change	Executiv	Janet Osborne	1281 N.Hwy US 1 Titusville, Florida 32796
Remove 3 / Change Add Remove	1st Vice	Joe Anderson	1281 N.Hwy US 1 Titusville, Florida 32796
4) Change Add	1st Vice	James Golden	1281 N.Hwy US 1 Titusville, Florida 32796
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

		 — ——
The date of each amendment(s) adoption date this document was signed.	rtion:	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: 11 the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not itment of State's records.	be fisted as the
Adoption of Amendment(s)	(CHECK ONE)	
was/were sufficient for approval.	oted by 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
Signature Allen
(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)
Leon H Flowers
(Typed or printed name of person signing)
Commander American Legion Post 1
(Title of person signing)