N0000000/162

(Re	equestor's Name)	,
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TG: Amendment Section
Division of Corporations

NAME OF CORPORATION	Ye Loyal Krewe of S ON:	amuel Bellamy			
DOCUMENT NUMBER:	N00000001162				
The enclosed Articles of An	nendment and fee are subm	nitted for filing.			
Please return all correspond	ence concerning this matte	r to the following:			
Sheila Ryan					
		(Name of Contact Pers	son)		
Ye Loyal Krewe of Samuel	Bellamy				
		(Firm/ Company)			
PO Box 2130					
		(Address)			
Brandon, FL 33509					
		(City/ State and Zip Co	ode)		
captain@samuelbellamy.co	m				
E	-mail address: (to be used	for future annual repor	rt notification	1)	
For further information cond	erning this matter, please	call:			
Sheila Ryan		8 at	313	971-7732	
•	(Name of Contact Person)		Area Code)	(Daytime Telephone l	Vumber)
Enclosed is a check for the f	following amount made pay	yable to the Florida De	partment of	State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
ar en	. * *	O.			

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

Ye Loyal Krewe of Samuel Bellamy (Name of Corporation as currently filed with the Florida Dept. of State) N00000001162 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Cor "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) Brandon, FL 33511 C. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX) Brandon, FL 33509	s the following
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B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Brandon, FL 33511 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) PO Box 2130	
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(Mailing address MAY BE A POST OFFICE BOX)	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	
Brandon, FL 33509	
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:	
Adrianus I de Ruijter	
Name of New Registered Agent: 224 S. Moon Ave.	
(Florida street address)	
New Registered Office Address:	
Brandon , Florida 335	11
(City) (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 positi	o n .
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 X Add	PT John Do V Mike John SV Sally Sm	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u> s
1) Change	CT	Ryan, Sheila	PO Box 2130
x Add			Brandon, FL 33509
Remove			
2) Change	VP	Adell, Deborah	PO Box 2130
x Add			Brandon, FL 33509
Remove			
3) Change	S	Whitmore, Bob	PO Box 2130
x Add			Brandon, FL 33509
Remove			
4) Change	Quartermaster	de Ruijter, Adrianus	PO Box 2130
x Add			Brandon, FL 33509
Remove			
5) Change	С	Wright, Sherri L	PO Box 172126
Add			Tampa, FL 33672
x Remove			
6) Change	VP	Schmidt, Marnie K.	PO Box 172126
Add			Tampa, FL 33672
x Remove		D 2.54	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) x Remove S Ragusa, Christopher M. PO Box 172126 Tampa, FL 33672 T Wright, Carey L, Jr. PO Box 172126 x Remove Tampa, FL 33672 x Remove Quartermaster Ward, Douglas PO Box 172126 Tampa, FL 33672 Clark, Edward L PO Box 172126 x Remove D Tampa, FL 33672 D Barry-Garcia, Wanda PO Box 172126 x Remove Tampa, FL 33672 Note: The check #948 is already in your possession and was cashed on 7/25/16 for \$43.75

f amending or adding additional Artitional Artitional Artitional sheets, if necessary).	(Be specific)
· — — — — — — — — — — — — — — — — — — —	
<u> </u>	

7/30/2016	
	other than the
date this document was signed.	
7/30/16	
Effective date if applicable:	
(no 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 list document's effective date on the Department of State's records.	ed as the
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.	
8/11/16 Dated	
Signature Meile Ly	
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)	
Sheila Ryan	
(Typed or printed name of person signing)	
Captain	
(Title of person signing)	