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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Veterans of Foreign Wars of the United States INC
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitt	ted for filing.
Please return all correspondence concerning this matter to	o the following:
Wayne A Hagan	
(N	ame of Contact Person)
Tom Glaze Post 8205	
	(Firm/ Company)
735 South Highway 22A	
	(Address)
Panama City, FL 32404	
(Ci	ity/ State and Zip Code)
vfwpost8205@knology.net	
E-mail address: (to be used for	r future annual report notification)
For further information concerning this matter, please cal	II:
Wayne A Hagan	478 397-6220
(Name of Contact Person)	at (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payal	ole to the Florida Department of State:
Certificate of Status (S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status Additional copy is enclosed) (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

POST NAME TOM GLAZE POST #8205 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

(Name of Corporation as currently filed with the Florida I	Dept. of State)
NO	1180
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617.1006 Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	The new tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	Wayne A Hagan
(Principal office address MUST BE A STREET ADDRESS	209 Lannie Rowe Drive
	Panama City, FL 32404
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent: N/A	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	
Si	re of New Registeress, 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 De V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>OM</u>	Wavne A Hagan	209 Lannie Rowe Drive Panama City, FL 32404
Remove			
2) Change Add	<u>CMD</u>	Adlai Barber	918 South Katherine Avenue Panama City, FL 32404
Remove 3) Remove Add X Remove	<u>QM</u>	John Gartner	Panama City, FL 32401
4) Change Add	SV	Jody Swem	512 Philips Court Panama City, FL 32404
x Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
N/A			
	-		

	
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	<u> </u>
The date of each amendment(s) adoption:	, if other than the
00/08/2020	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date	
Note: If the date inserted in this block does not meet the applicable statutory filing requires 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 member adopted by the board	s or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.
Dated Signatu		0/23/20209
	ha	the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
		Wayne A Hagan
		(Typed or printed name of person signing)
		Post Quartermaster
		(Title of person signing)