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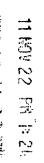
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	EEN COVE	SMINGS POST	1988, USTERANS OF
		of the UNITED	STATES, INCL
DOCUMENT NUMBER: <u>NOS</u>	334		
The enclosed Articles of Amendment a	nd fee are submitted	for filing.	
Please return all correspondence concer	ming this matter to th	e following:	
1/100-1- 6	2 WH -TE		
VIREIL A	(Name of Contac	t Person)	
1/=1/0	ST 1988		
1/FW po	(Firm/ Comp	any)	
D6 BTX	883		
PO BOX	(Address)	_
GREEN CO	VE SMII	is FL 32	2047
	(City/ State and Z	Cip Code)	
VFN19886	Bellson	4. NZT	
E-mail addre	ess: (to be used for fu	ture annual report notificati	on)
For further information concerning this	matter, please call:		
Viggil R. WHITTEN	at :	704 764-	0775
(Name of Contact Person) at ((704) 284- (Area Code & Daytime	Telephone Number)
Enclosed is a check for the following ar	nount made payable	to the Florida Department o	of State:
\$35 Filing Fee \$43.75 Filing	g Fee &	\$43.75 Filing Fee &	□ \$52.50 Filing Fee
Certificate of S	(Ac	tified Copy Iditional copy is closed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address	,
Division of Corporations		Amendment Section Division of Corporations	5
P.O. Box 6327		Clifton Building	Ni1
Tallahassee, FL 32314		2661 Executive Center C Tallahassee, FL 32301	urcie

Articles of Amendment

Articles of Incorporation
GREET, COUR SPILLES POST 1988, VETERANS of FOREIGN WARS
(Name of Corporation as currently filed with the Florida Dept. of State)
N03334
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "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)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. 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:
Name of New Registered Agent: VIRGIL R. WHITTEN
Name of New Registered Agent: VIRGIL R. WHITTEN 421. 5. IRAGE AUZ New Registered Office Address: (Florida street address)
(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 position.
Signature of New Registered Agent, if changing
Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
COMMANDA	LAURANCE HILL	421.5. DEANGE AVE BREEN COVE SAVES FL 52048	Add Remove
5 R. VIOC	NORM KILE	421. S. GRAMAR AUZ GREEN COLOSPORSON 32043	Add Remove
JR VICE	DOUG SHERREL	GREEN COVE SARINGS FL 72043	Add Remove
	g or adding additional Articles, enter itional sheets, if necessary). (Be speci		
			

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)

<u>Title</u>	Name	Address	Type of Action
Monny ANDER	ROGER MANNING	GUEEN COVE SAINS FL. 32043	□ Add ⊠ Remove
	Robert Colling	471 5- ORANGE AVC GERN COUS SPRING FL SZOYS	☐ Add Remove
JRVICE	Doug Shaker		Add Remove
	or adding additional Articles, enter clional sheets, if necessary). (Be specific		
			

The date of each amendment(s) adoption: / July Jul/	
(date of adoption is required)	
Effective date if applicable: 101 201 (no more than 90 days after amendment file d	ate)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cas was/were sufficient for approval.	t for the amendment(s)
☐ There are no members or members entitled to vote on the amendment(s). The am adopted by the board of directors.	endment(s) was/were
Dated 11-2-2011	
Signature Laureuse Tell	
(By the chairman or vice chairman of the board, president of have not been selected, by an incorporator – if in the hand other court appointed fiduciary by that fiduciary)	
LANGUAGE HILL	·
(Typed or printed name of person signing))
Commander (Title of person signing)	

Page 3 of 3