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COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: American	Legion Past 183, The
DOCUMENT NUMBER: Not as as as a constant number.	3081
The enclosed Articles of Amendment and fee are submitted for fi	ling.
Please return all correspondence concerning this matter to the following	owing:
Bernard Bekanoski III	
(Name of C	Contact Person)
American Lesion Post	183, Inc.
2706 Wells Ave	
(A	ddress)
FernPark FC 32730	
	and Zip Code)
BMX BEIN'E & GMAL, COM E-mail address: (to be used for future a	
E-mail address: (to be used for future a	innual report notification)
For further information concerning this matter, please call:	
	4077259922
Beinaid bokanoski III	at 407.831.8004
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the	Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 F Certificate of Status Certified (Addition enclosed)	Gopy Certificate of Status nal copy is Certified Copy
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

	of
American Legion Post	183 FUC
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
	, , , , , , , , , , , , , , , , , , ,
NO5000003081	nber of Corporation (if known)
(Document Num	iber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ates, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:
	The new
name must he distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N IA
(Principal office address <u>MUST BE A STREET ADDRESS</u>	(2
	72
	2019
	7: 7:
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A 55 =
(maining address services of the services)	
	<u></u>
D. If amending the registered agent and/or registered off	
new registered agent and/or the new registered office	•
Name of New Registered Agent: 138	inaid Bokanoski III
-776	Wells AVe (Florida street address)
$\alpha_{i,a}$	(Florida street address)
New Registered Office Address:	
Feri	n Park, Florida FC
· · · · · · · · · · · · · · · · · · ·	(City) (Zip Code) 3273 0
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	
, areap ine appointment as registered agent. I um j	A A A A A A A A A A A A A A A A A A A
	1/2/11/11
	Signature of New Registered Agent, if changing

Page 1 of 4

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: XChange X Remove X Add	PT John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change Add	P Dennis Pan	Farn Park FL 32730
Remove 2) Change Add	P Bernard Bokanosi	Fern Park FL 3273
Remove 3) Change Add Remove		
4) Change Add Remove		
5) Change Add Remove		
6) Change Add Remove		

E. If amending or adding additional Articles, enter change (attach additional sheets, if necessary). (Be specific)	
· · · · · · · · · · · · · · · · · · ·	
······································	

The date of each amendment(s) adoption: 18 Apr / 9 date this document was signed.	_, if other than the
Effective date if applicable: 18 April 19 (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 b	e 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.	
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 18 APC 19	
Signature	_
(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)	
Bernard Bokanoski III	
(Typed or printed name of person signing)	
President	
(Title of person signing)	