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Amend

TB

JUL 20 2009

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NATURE CO.	AST YOUNG MARI	NES, INC
DOCUMENT NUM	BER: N06000006762		
	of Amendment and fee are sub	mitted for filing.	
Please return all corre	spondence concerning this matt	er to the following:	
	CARL	KNUDSEN	
		Contact Person)	
	NATURE COAST	YOUNG MARINES, IN	C
	(Firm	/ Company)	
	12025 W A	APPLETREE PL	
	()	Address)	
		RIVER, FL 34428	<u> </u>
	(City/ Star	te and Zip Code)	
		n@hughes.net d for future annual report no	tification)
For further informatio	n concerning this matter, please	e call:	,
Carl Knudsen		_{at (} 352 ₎ _586-	-7401
	of Contact Person)	(Area Code & D	Paytime Telephone Number)
Enclosed is a check for	r the following amount made p	ayable to the Florida Depart	ment of State:
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	\$\begin{align*} \\$43.75 \text{ Filing Fee & Certified Copy} \ (Additional copy is enclosed) \end{align*}	☑ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Sectorial Division of Corp Clifton Building 2661 Executive Corp Tallahassee, FL	orations Center Circle

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

NATURE COAST YOUNG MARINES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N06000006762

(Document Number of Corporation (if known)

2009 JUL 14 AM 11: 34

TAILAHASSEE. FLORIDA Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

e new name must be distinguishable an breviation "Corp." or " Inc." <u>"Compan</u>	d contain the word "or "Co." may not	"corporation" or "i be used in the name	ncorporated" or the
Enter new principal office address, if rincipal office address MUST BE A STR			
Enter new mailing address, if applica (Mailing address MAY BE A POST OF			
If amending the registered agent and/new registered agent and/or the new r			enter the name of th
			enter the name of th
new registered agent and/or the new r	egistered office add		enter the name of th
new registered agent and/or the new r Name of New Registered Agent:	egistered office add	ress:	enter the name of th

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>	<u>Address</u>	Type of Action
XO	SHAWN HARRISON	4078 South Tom Ave Inverness, FL 34452	☑ Add ☐ Remove
			Add Remove
Amend A religious, distribution of the Interpretation organization healthy, of	ding or adding additional Articles, entidditional sheets, if necessary). (Be specificational sheets).	ecific) In is organized exclusively for ses, including, for such purposes exempt organizations under a holing section of any future feature building and leadership, and rines is the focal point for Ur	oses, the making of er section 501(c)(3) ederal tax code. The d promotes a
Marine C	orps' youth Drug Demand Reduct	ion enors.	

The date of each amendment	t(s) adoption: June 1, 2009
Effective date <u>if applicable</u> :	June 11, 2009 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☑ The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_7 Ju	oly 2009
hav	the chairman or vice chairman of the board, president or other officer-if directors on the been selected, by an incorporator — if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Carl C Knudsen III
	(Typed or printed name of person signing)
	Paymaster/4th BN CO
	(Title of person cigning)

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