

NO80000007517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 OCT - 6 PM 2:39

Amend / cus
Name chg
@ 10/6/10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: WELLINGTON AMERICAN LEGION POST 390 INC.

DOCUMENT NUMBER: N08000007517

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARC S. PIVEN
(Name of Contact Person)

SAME
(Firm/ Company)

13860-38 WELLINGTON TRACE PMB 120
(Address)

WELLINGTON FL 33414
(City/ State and Zip Code)

MSPIVEN@COMCAST.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARC PIVEN at (561) 635 1168
(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:

- | | | | |
|------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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 Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 28, 2010

MARC S. PIVEN
13860-38 WELLINGTON TRACE - PMB 120
WELLINGTON, FL 33414

SUBJECT: WELLINGTON AMERICAN LEGION POST 390 INC.
Ref. Number: N08000007517

We have received your document for WELLINGTON AMERICAN LEGION POST 390 INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 210A00022966

RECEIVED
10 OCT - 6 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

WELLINGTON AMERICAN LEGION POST 390 INC

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

N 08000007517

(Document Number of Corporation (if known))

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
10 OCT -6 PM 2:39

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:

A. If amending name, enter the new name of the corporation:

CHRIS REYKA MEMORIAL POST 390 INC.

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)

1309 PINE VALLEY DR
WELLINGTON FL 33414

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

13860-38 WELLINGTON TRACE
PMB 120
WELLINGTON FL 33414

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:

THOMAS M WENHAM

New Registered Office Address:

1309 PINE VALLEY DR

(Florida street address)

WELLINGTON

(City)

Florida 33414
(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

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>	<u>Type of Action</u>
<u>D</u>	<u>DAVID A KNAPP</u>	<u>13346 Northumberland</u> <u>Gr</u> <u>Wellington FL 33414</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>D</u>	<u>THOMAS R CLAPP</u>	<u>14320 Horseshoe Tr</u> <u>Wellington FL 33414</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

[illegible]

The date of each amendment(s) adoption: MAY 20, 2010
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 9/22/2010

Signature Thomas M. Wenham
(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)

THOMAS M. WENHAM
(Typed or printed name of person signing)

PRESIDENT - (POST COMMANDER)
(Title of person signing)