

NO90000001198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

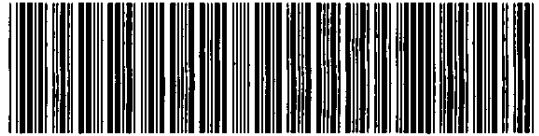
(Document Number)

Certified Copies _____

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01/21/10--01042--014 **113.75

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FILED DATE
2-6-10

FILED
10 FEB -3 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts FEB 03 2010



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2010

RALPH A. SANTILLO
INVEST IN AMERICAS' VETERANS FOUNDATION
3100 DEL PRADO BLVD BLDG 3 UNIT 6
CAPE CORAL, FL 33904

SUBJECT: INVEST IN AMERICAS' VETERANS FOUNDATION, INC
Ref. Number: N09000001198

We have received your document for INVEST IN AMERICAS' VETERANS FOUNDATION, INC and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 410A00001921

RECEIVED
2010 FEB -3 AM 8:00
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Keep Original
Not Office

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Invest in Americas' veterans Foundation, Inc

DOCUMENT NUMBER: N09000001198

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

Please return all correspondence concerning this matter to the following:

Ralph A. Santillo
(Name of Contact Person)

Invest in America's Veterans Foundation, Inc
(Firm/ Company)

3100 Del Prado Blvd S Bldg 3 unit 6
(Address)

Cape Coral, Fl. 33904
(City/ State and Zip Code)

ralphandrew@embarqmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ralph A. Santillo at (239) 541-8704
(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

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$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

Articles of Amendment
to
Articles of Incorporation
of

FILED
2-6-19

Invest in America's Veterans Foundation, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)

NO9000001198

(Document Number of Corporation (if known))

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:

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:

New Registered Office Address:

(Florida street address)

_____, Florida
(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

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10 FEB -3 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>Pres</u>	<u>Stanley Weinberg</u>	<u>10100 Beal Lane</u> <u>N. Ft Myers</u> <u>Florida, 33904</u>	☐ Add ☒ Remove
<u>VP</u> 	<u>John Roy</u>	<u>65409 Highway 1058</u> <u>Roseland</u> <u>Lousiana, 70456</u>	☐ Add ☒ Remove
<u>Pres</u>	<u>Ralph A. Santillo</u>	<u>4120 Kismet Pwy W</u> <u>Cape Coral</u> <u>Florida, 33993</u>	☒ Add ☐ 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: 11/30/09 -
(date of adoption is required)

Effective date if applicable: 01/06/10 -
(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 11/6/09

Signature Charles Muccio
(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)

CHARLES MUCCIO
(Typed or printed name of person signing)

TREASURER
(Title of person signing)