

N10000009466

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Amend

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ORDER of St. John of Jerusalem,
Knights Hospitaller of Florida INC,

DOCUMENT NUMBER: N10000009466

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

Please return all correspondence concerning this matter to the following:

ROBERT H MOORE

(Name of Contact Person)

(Firm/ Company)

790 ANDREWS AVE #301-C

(Address)

DELRAY BEACH. FLORIDA 33483

(City/ State and Zip Code)

acemoore@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT H MOORE

(Name of Contact Person)

at (561) 278-9788

(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

Order of St. John of Jerusalem, Knights Hospitaller of Florida Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

N10000009466

(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)

Isabelle Paul

1771 Sabal Palm Drive

Boca Raton, Fl 33432

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1771 Sabal Palm Drive

Boca Raton, Fl 33432

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:

Robert H Moore

790 Andrews Ave. 301-C

New Registered Office Address:

(Florida street address)

Delray Beach

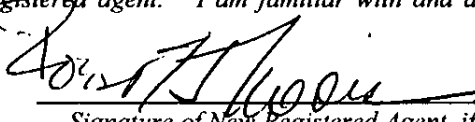
(City)

Florida 33483

(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

(Attach additional sheets, if necessary)

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Page 2 of 3

**Order of St. John of Jerusalem, Knights Hospitaller of Florida Inc.
State of Florida document number N10000009466**

Attachment to Articles of Incorporation

ARTICLE D

REMOVE THE FOLLOWING THREE OFFICER DIRECTORS:

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>
Director-President	Janet Hall	27 Shawnee Ridge Dr. The Woodlands, Tx 77382
Director-Vice Pres	Ann Van Ness	P.O. Box 117 Saddle River, NJ 07458
Director-Secy-Treas	Donald R Mandich	1675 Cypress Row Drive West Palm Beach, FI 33411

ADD THE FOLLOWING FOUR OFFICER TRUSTEES:

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>
Trustee-President Commander	Isabelle Paul	1771 Sabal Palm Drive Boca Raton, FI 33432
Trustee-1st Vice Pres 1st Vice Commander	James A Labrie	100 South Pointe Dr. #2405 Miami Beach, FI 33139
Trustee-2nd Vice Pres 2nd Vice Commander Treasurer	Robert H Moore	790 Andrews Avenue Delray Beach, FI 33483
Trustee-Secretary	Ellen Labrie	100 South Pointe Dr. Miami Beach, FI 33139

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The date of each amendment(s) adoption: April 8, 2011

Effective date if applicable: Filing date with the State of Florida
(date of adoption is required)

(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 5/27/2011

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)

Ann Van Ness

(Typed or printed name of person signing)

Vice President and Director

(Title of person signing)