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SECRETARY OF STATE DIVISION OF CORPORATION

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D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Fraternal Order of Police Titusville Lodge
DOCUMENT NUMBER: 1200000867
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sara Macstassy (Name of Contact Person)
Fraternal Order of Price Titosville Lodge Flo (Firm/Company)
P.O. Box 1986 (Address)
Titusville, FZ 32780 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sava Macskassy (321) (302)-(2238)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
\$35 Filing Fee

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 Articles of Incorporation

•		
		9252
. A I	ticles of Amendment	₹ 66%
Ar	to icles of Incorporation	1 (A)
	of	
ratural order of Pa	ice Titusville rrently filed with the Florida De	Lodge 170, INC.
D15000	FV BCCC	(i) (ii)
	umber of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·
rsuant to the provisions of section 617.1006, Florida St mendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit	t Corporation adopts the following
If amending name, enter the new name of the corp	oration:	
·		The new
ame must be distinguishable and contain the word "corp Company" or "Co." may not be used in the name.	poration" or "incorporated" or the	
Enter new principal office address, if applicable:		
rincipal office address <u>MUST BE A STREET ADDRI</u>	<u>ESS</u>)	
	····	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered	office address in Florida, enter t	the name of the
new registered agent and/or the new registered off	ice address:	<u> </u>
Name of Nav Booletaned Agents		
Name of New Registered Agent:		
	/El J	and and discount
New Registered Office Address:	(Florida stre	eei aaaress)
*		m
	(City)	, Florida (Zip Code)
	(City)	(Lip Coue)
ew Registered Agent's Signature, if changing Regist	ered Agent:	
nereby accept the appointment as registered agent. I a	m familiar with and accept the obl	ligations 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)

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 <math>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:			
X Change X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>19</u>	Severy Gonzalez	P.O. Box 1986 Trosuille, Fz 32780
Add			Trosuille, Fz 32780
Remove			
2) Change			
Add			
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(s) here: , (attach, additional sheets, if necessary). (Be specific)		
, (attach,additional sheets, if necessary).	(Be specific)	
	· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: _date this document was signed.	4/28/17 , if other than th
Effective date if applicable:	4/28/17
	o more than 90 days after amendment file date) not meet the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Department	
Adoption of Amendment(s)	CHECK ONE)
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)
There are no members or members entitle adopted by the board of directors.	led to vote on the amendment(s). The amendment(s) was/were
Dated 41281	}
Signature	
have not been selected	ice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or a fiduciary by that fiduciary)
50	(Typed or printed name of person signing)
	President (Title of person signing)