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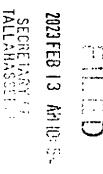
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ANCIENT ORDER	OF HIBERNIANS IN	AMERICA,	INC. DIVISION II, BREVARD CO
DOCUMENT NUMBER:	N12000001440			
The enclosed Articles of Ar	mendment and fee are sub	mitted for filing.		
Please return all correspond	lence concerning this matt	er to the following:		
Keith P Reynolds				
	 -	(Name of Contact Per	son)	
ANCIENT ORDER OF HI	BERNIANS IN AMERIC	A, INC. DIVISION II,	BREVARD	COUNTY FLORIDA
		(Firm/ Company)		
4845 SILVER OAK BLVE).			
		(Address)		.,
MELBOURNE, FL 32935				
-		(City/ State and Zip C	ode)	
AOHBC2@GMAIL.COM				
I	E-mail address: (to be used	for future annual repo	rt notification	n)
For further information con	cerning this matter, please	call:		
Keith P Reynolds		{ at	345	590-9143
	(Name of Contact Person		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	yable to the Florida De	epartment of	State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status icd Copy tional Copy is osed)
A C - 111		~		

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Article	to s of Incorporation of	
ANCIENT ORDER OF HIBERNIANS IN AMERICA. INC		evard countraft orida
(Name of Corporation as currently filed with the Florida	Dept. of State)	TOECHO ANIM
N12000001440		ALLAMAGEN CONTE
(Document Numb	per of Corporation (i	f known)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporate	tion:	
AOH BREVARD COUNTY, DIV. 2, INC.		The new
name must he distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorpora	
B. Enter new principal office address, if applicable:	4130 NORTH HA	RBOR CITY BLVD.
(Principal office address MUST BE A STREET ADDRESS	MELBOURNE, F	L 32935
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P. O. BOX 993	
	MELBOURNE, FI	L 32902-0993
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		da, enter the name of the
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		ept the obligations of the position.
	ignature of New Reg	distered 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 PTD.

Changes should be noted in the following manner. Currently John Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>P</u>	KEITH REYNOLDS	4845 SILVER OAK BLVD MELBOURNE, FL 32935
Remove			
2) × Change Add	<u>V</u>	BRIAN MCCANN	299 WEBSTER AVE MELBOURNE, FL 32934
Remove 3) × Change Add Remove	<u>T</u>	SCOTT JURGENSEN	4850 SILVER OAK BLVD. MELBOURNE, FL 32935
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		rticles, enter change(s) here: c. (Be specific)	
***			···

arepsilon .	
	-
The date of each amendment(s) adoption:	, if other than th
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment	file date)
Note: If the date inserted in this block does not meet the applicable statutory filin document's effective date on the Department of State's records.	g requirements, this date will not be listed as the

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.

d	here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.
	Dated FEBRUARY 7, 2023
	Signature (By the chairman or vice chairman of the hand and the state of the land
	(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)
	KEITH P REYNOLDS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)