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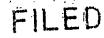
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FRATERNAL CROSS OF POLICE, LANDERHUL ASSOCIATE LOAGE WIGH, INC.
DOCUMENT NUMBER: NIZ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
KURT BLANDES
(Name of Contact Person) The Contact Person of the Contact Person
FRATERNAL CASER OF POLICE LANDERSHIL ASSOCIATE LOAGE FILL INC. (Firm/ Company)
(Firm/ Company)
4846 N. University Daine # 178 (Address)
(Address)
(City/State and Zip Code)
Kgb 5555 @ bellsouth.net
E-mail address: (to be used for future annual report notification);
For further information concerning this matter, please call:
(Name of Contact Person) at (754) 244-8877  (Area Code & Daytime Telephone Number)
(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
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## Articles of Amendment is to Articles of Incorporation of



FRATERNAL DEDER OF POLICE LAWS	reque Associat	= Long = 2012 APR 23 PM 4: 12
(Name of Corporation as currently filed with the Flo		SECRETARY OF STATE
ペルスゆのなのの 2 - (Document Number of Corpora	340	IALLAMADOLL
(Document Number of Corpora	ation (if known)	12 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Pursuant to the provisions of section 617.1006, Florida Statute mendment(s) to its Articles of Incorporation:	s, this <i>Florida Not Fo</i>	r Prosit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
214		The nev
name must be distinguishable and contain the word "corporat	tion" or "incorporated	l" or the abbreviation "Corp." or "Inc.'
Company" or "Co." may not be used in the name.		
3. Enter new principal office address, if applicable:	214	
Principal office address <u>MUST BE A STREET ADDRESS</u> )		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	~)&	· .
·		
). <u>If amending the registered agent and/or registered office</u> new registered agent and/or the new registered office a		enter the name of the
Name of New Registered Agent: Kont 3	LANDES	
4846 2	Onversity f (Florida street address)	Deve \$ 178
New Registered Office Address:	rionaa sireet aaaress)	
Composition	٠ــ	Florida 33351
(City)		, Florida 3333 1 (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fan		

Page 1 of 4

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 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	PT John	Doe	
X Remove	V Mike	: Jones	·
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>∠</u> Change Add Remove	P	KIRT BLAINES	4846 N. Onversity Here #178 LANDERHUL, FL 33351
2) Change Add Remove	<u> </u>	NORMAN HARREL	4846 N. Umor. ty 1) 814 # 78 12551
3)Change Add Remove		STEVEN RIDLEY	
4) Change Add Remove		WINNIELDED NISSETH	LANDERSTULIER 33357
Change Add Remove	工	JULIAN JAMES	
Change  Change  Remove	SERG	ROBERICK PATTERSON	48410 N. Valvasty Dave 2178

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 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	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>S-T</u>	SANARA GIBRONS-SCOTT	
2) Change Add Remove	7	DALTON COMPLE	<del>- 10   11   11   11   11   11   11   11 </del>
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

<u>If amending or adding addition</u> attach additional sheets, if nece	essary).	(Be spec	ific)					•		
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The date o	of each amendme	nt(s) adoption:	43	12		
Effective o	iate <u>if applicable</u>		1	4.11		
		0	no more than 90	days after amei	ndment file date)	
			-	•		
Adoption	of Amendment(s)	(	(CHECK ONE)			
	mendment(s) was vere sufficient for		y the members a	nd the number o	of votes cast for th	ie amendment(s)
	are no members of ed by the board of		itled to vote on th	ne amendment(s	). The amendme	nt(s) was/were
	Dated	4/17/2	L012			
	Signature	15/	35		•	
	(By 1) have	not been select		orator – if in the	ident or other offi hands of a recei	
	12 um		AIDES			
		(Typed	or printed name	of person signir	1 <b>g</b> )	
		Pres	IDEUT			
		(Title	of nerson signing	o)		