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C. LEWIS

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**EXAMINER** 

## & COVER-LETTER

TO: Amendment Section Division of Corporations	:		
e <sup>te</sup> ve	APTAIN CUYLER V	VALTER HILLIA	RD, AMERICAN LEGION
NAME OF CORPORATION:			,
N130	0000040		
DOCUMENT NUMBER:			
The enclosed Articles of Amendmen	nt and fee are submitted f	or filing.	
Please return all correspondence cor	ncerning this matter to the	following:	
CHARLES K SHERWOOD	1		
	(Name	of Contact Person)	**************************************
	(F	'irm/ Company)	<del></del>
15862 CR 108			
		(Address)	
HILLIARD, FL 32046			
***************************************	(City/	State and Zip Code)	, <u>, , , , , , , , , , , , , , , , , , </u>
CWHILLIARD4	01@GMAIL.COM		
E-mail a	ddress: (to be used for fut	ure annual report not	ification)
For further information concerning	this matter, please call:		
HEATHER A ANDREWS		904	755-2072
(Name of Contact Pe	erson)	at () (Area Code	e & Daytime Telephone Number)
`	·	·	•
Enclosed is a check for the followin	g amount made payable t	o the Florida Departi	nent of State:
	(Add	75 Filing Fee & I ified Copy ditional copy is losed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Secti Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on rations	Division of Clifton Brace 2661 Exe	ent Section of Corporations

#### **Articles of Amendment**

to

## Articles of Incorporation of

### CAPTAIN CUYLER WALTER HILLIARD, AMERICAN LEGION POST 401, DEPARTMEN

(Name of Corporation as currently filed with the Flo N1300000406	orida Dept. of State)		
(Document Number of C	orporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation add	opts the follo	wing
A. If amending name, enter the new name of the corporat	ion:		
			new .
name must be distinguishable and contain the word "corpora "Company" or "Co," may not be used in the name.		Corp." or "l	nc."
B. Enter new principal office address, if applicable:	554084 US HIGHWAY 1		
(Principal office address <u>MUST BE A STREET ADDRESS</u>	HILLIARD, FL 32046		
C. Enter new mailing address, if applicable:	PO BOX 153		13 14
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	HILLIARD, FL 32046	多	I - A0
D. If amending the registered agent and/or registered offi			3 NOV -1 AM 10: 5:
new registered agent and/or the new registered office a  Name of New Registered Agent:	iddress:		7
New Registered Office Address:	(Florida street address)		
	, Florida		_
(City)	(Z	ip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		sition.	
Signature of New	Registered Agent if changing		

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 X_Remove X_Add	PT John Do V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	SEC	NICOLE BIRD	38036 LEE STREET
Add	-mile-reflect auxiliary and in-disease		HILLIARD, FL 32046
Remove  2) Change	TRES	LEE WILKES	473183 MIDDLE ROAD
X			HILLIARD FL 32046
Remove 3) Change	SEC	WESLEY D BAKER	45239 BISMARK RD
X Add			CALLAHAN FL 32011
Remove			
4) Change	TRES	JACKIE BLACK	2965 BLACKWAY LN
X Add			BRYCEVILLE, FL 32009
Remove			······································
5) Change	<del> </del>		
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

S

(attach additional sheets, if necessary).	(Be specific)			
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•				
The	date of each amendment(s) ad	option:	APPISOVEL	, if other than the
date	this document was signed.		MA	
T- 66	4. 1.4 10 11 13		TILED .	
Lite	ctive date <u>if applicable</u> :	(no more than 90 days after amer	adment file date(2) NOV 1	<del>_</del>
		(no more man 20 days after amer	nament file date()3 NOV -   AM 10:	57
Ado	ption of Amendment(s)	(CHECK ONE)	SECHETAR) UP STA	TE IDA
X	The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of l.	of votes cast for the amendment(s)	
	There are no members or membadopted by the board of director	ers entitled to vote on the amendment(s	). The amendment(s) was/were	
	Dated	31/13		
	Signature (	f WALA		
	(By the chair	nan or vice chairman of the board, pres		
		n selected, by an incorporator – if in the	e hands of a receiver, trustee, or	
	other court a	ppointed fiduciary by that fiduciary)		
	CHARLES	(Typed or printed name of person signing)		
		(Typed or printed name of person signing	ng)	
	P	COMMANDER		
		(Title of person signing)		