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(Business Entity Name)

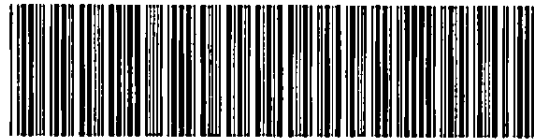
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SECRETARY OF STATE  
HALL MARKS, ELLIOTT

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: FIRST COAST CHAPTER OF LEATHERNECKS MC INTERNATIONAL, INC.

DOCUMENT NUMBER: \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Teddy Colegate

\_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/ Company)

306 lake marietta drive west

\_\_\_\_\_  
(Address)

jacksonville, florida

\_\_\_\_\_  
(City/ State and Zip Code)

tcolegate@gmail.com

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

For further information concerning this matter, please call:

Kaitlin Colegate

352

817 7258

at

\_\_\_\_\_  
(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

☒ \$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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
2021 OCT 29 AM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FL

FIRST COAST CHAPTER OF LEATHERNECKS MC INTERNATIONAL, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

(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:

FIRST COAST HEROES OUTREACH, INC.

*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**)

306 lake marietta drive west

Jacksonville, Florida 32220

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

306 Lake Marietta Drive West

Jacksonville, Florida 32220

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:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(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.

N/A

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 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Teddy Colegate</u>	<u>306 lake marietta drive west</u> <u>jacksonville, florida 32220</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>P</u>	<u>Troy Hoffman</u>	<u>2198 West Haines Pass</u> <u>Greenfield, Indiana 46140</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Dennis Hall</u>	<u>432 Cvnthia Street</u> <u>Jacksonville, Florida 32254</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>S</u>	<u>Mike T. Rietvelt</u>	<u>633 W John's Creek Parkway</u> <u>St. Augustine, Florida 32092</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Richard Dinnan</u>	<u>432 Cvnthia Street</u> <u>Jacksonville, Florida 32254</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>V</u>	<u>Shawn Chabot</u>	<u>113 Forest Ridge Trail</u> <u>Stella, North Carolina 28582</u>

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

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

1. Article 1 should now read as follows: The name of the corporation should is: First Coast Heroes Outreach, Inc.

2. Article II should now read as follows: The principal place of business and mailing address is 306 lake marietta drive west Jacksonville, Florida 32220.

3. Article III should now read as follows: Veterans organization focusing on resource allocation, mental health awareness, and confidential mental health counseling for active military, veterans and first responders. Provide no/low cost transportation options to veteran and first responders in need. Provide event options for veterans and first responders promoting camaraderie and brother/sisterhood and mental health stability.

4. Article V should now read as follows: The name and Florida street address of the registered agent is: Teddy Colegate  
306 Lake Marietta Drive West Jacksonville, Florida 32220

5. Article VII should now read as follows: Title: President Troy Hoffman 2198 West Haines Pass Greenfield,  
Indiana 46140 Title: Vice President Shawn Chabot 113 Forest Ridge Trail Stella, North Carolina 28582  
Title: Secretary Mike T. Rietvelt 633 W John's Creek Parkway St. Augustine, Florida 32092

The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

Effective date if applicable: November 1st, 2021  
(no more than 90 days after amendment file date)


**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 10/24/2021

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)

Teddy Colegate  
(Typed or printed name of person signing)

President  
(Title of person signing)