# N13000007611

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## **COVER LETTER**

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION:	SSEE ENCA	MPMENT NO. 11, INC.		
DOCUMENT NUMBER: N130000761				
The enclosed Articles of Amendment and fee are submitted	i for filing.			
Please return all correspondence concerning this matter to t	the following:			
Peggy J. Moffitt, Scribe/Fin	nancial Sc	ribe		
(Nar	me of Contact Persor	)		
I.O.O.F. TALLAHASSEE ENCAMPMENT NO. 11, INC.				
	(Firm/ Company)			
P. O. Box 180188				
	(Address)			
Tallahassee, FL 32318				
(City	/ State and Zip Code	e)		
pmpaperworks1@juno.com				
E-mail address: (to be used for t	uture annual report i	notification)		
For further information concerning this matter, please call:				
Peggy J. Moffitt	at (850	294-1405  de & Daytime Telephone Number)		
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)		
Enclosed is a check for the following amount made payable to the Florida Department of State:				
(A	3.75 Filing Fee & entified Copy dditional copy is nelosed)	□\$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### Articles of Amendment to Articles of Incorporation of



14 JAN 13 AM 11:55

(Name of Corporation as curren	tly filed with the Florida Dept. of State	
N13000007611		11 1 × 1 × 1 × 1
(Do	cument Number of Corporation (if known	
rursuant to the provisions of section 617 mendment(s) to its Articles of Incorpora		For Profit Corporation adopts the following
. If amending name, enter the new n	ame of the corporation:	
.O.O.F. TALLAHASSEE	E ENCAMPMENT NO. 11,	INC. The new
		ed" or the abbreviation "Corp." or "Inc."
Company" or "Co." may not be used i	<u>n the name</u> .	
B. Enter new principal office address.  Principal office address MUST BE A S		
rnncipal office address <u>MUST BE AS</u>	IREEI ADDRESS )	
Enter new mailing address, if app (Mailing address MAY BE A POST		
(Mutung address MAT BE A FOST	OFFICE BOX)	
. If amending the registered agent a	nd/or registered office address in Florid	a, enter the name of the
new registered agent and/or the ne		a, enter the name of the
Name of New Registered Agent.	Donivan W. Henry	
	2114 Harriet Drive	
	(Florida street address)	<del></del>
New Registered Office Address	<b>5:</b>	
	Tallahassee	, Florida 32303
	(City)	(Zip Code)
lew Registered Agent's Signature, if a	hanging Registered Agent:	
	tered agent. I am familiar with and acce	ot the obligations of the position.
	Down woton	
	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	<u>V</u> <u>Mike</u>	Doe e Jones v Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add Remove	P/CP	Edward D, Buist, Jr.	5500 N. Monroe Street Tallahassee, FL 32303
2) Change X Add	S/FS	Peggy J. Moffitt	5500 N. Monroe Street Tallahassee, FL 32303
Remove 3) Change	TREA	Michael Rodes	5500 N. Monroe Street Tallahassee, FL 32303
4) Change Add Remove			
5) Change Add Remove		<del></del>	
6) Change Add Remove	<del></del>		

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Correcting name of corporation.
2. Adding Federal Employer Identification Number (FEIN) for
I.O.O.F. TALLAHASSEE ENCAMPMENT NO. 11, INC.
FEIN IS 45-5440771. This information was not included in
original submission.
3. First name of original President of corporation should have been spelled
"Donivan" instead of "Donovan".
4. Last name of Treasurer of corporation should have been
spelled "Rodes" instead of "Rhodes".

	date of each amendment this document was signed	• • • • • • • • • • • • • • • • • • • •	, if other than the
Effective date if applicable:		January 13, 2014	
	tivo dato <u>it approach</u> .	(no more than 90 days after amendment file date)	<del></del>
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	Dated Jar	uary 13, 2014	
	Signature	ward of	
	(By the	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Edward	d D. Buist, Jr.	
		(Typed or printed name of person signing)	
	Preside	ent (Chief Patriarch)	
	-	(Title of person signing)	