

114000005978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Mr. Scott gave authorization
to correct application and add
Inc. to new name. dec

Office Use Only



100263493981

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08/25/14--01042--008 **35.00

FILED
14 AUG 25 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.M.
8/26/14

COVER LETTER

TO: Amendment Section
Division of Corporations

FILED
14 AUG 25 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Overland Veteran Outdoors

NAME OF CORPORATION: _____

N14000005978

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Benjamin Scott

(Name of Contact Person)

Operation Veteran Outdoors

(Firm/ Company)

190 Bry Lynn Drive

(Address)

West Melbourne, Florida, 32904

(City/ State and Zip Code)

scottfreecustoms@gmail.com

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

For further information concerning this matter, please call:

190 Bry Lynn Drive

321

987-5294

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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Overland Veteran Outdoors Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)
N14000005978

(Document Number of Corporation (if known))

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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:

Operation Veteran Outdoors 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**)

190 Bry Lynn Drive

West Melbourne, FL

32904

C. Enter new mailing address, if applicable:

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

190 Bry Lynn Drive

West Melbourne, FL

32904

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:

Benjamin Scott

190 Bry Lynn Drive

(Florida street address)

New Registered Office Address:

West Melbourne

Florida 32904

(City)

(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.


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 checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Thomas Trotter</u>	<u>1555 Sumter Lane</u> <u>West Melbourne, FL</u> <u>32904</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Benjamin Scott</u>	<u>190 Bry Lynn Drive</u> <u>West Melbourne, FL</u> <u>32904</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>Israel Matos</u>	<u>214 Consolata ave NW</u> <u>Palm Bay, FL</u> <u>32907</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>William Orndorf</u>	<u>1950 Palomino rd</u> <u>Melbourne, FL</u> <u>32934</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Rory Dobis</u>	<u>4820 Valdine ave</u> <u>Cocoa, FL</u> <u>32926</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Glenn Evers</u>	<u>3250 Aurora rd.</u> <u>Melbourne, FL</u> <u>32934</u>

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

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

I Benjamin Scott am familiar with the obligations of this position as President and new Registered agent.

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

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 8/19/2014

Signature [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)

Ben Scott

(Typed or printed name of person signing)

President

(Title of person signing)

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