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Amend

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: VETERANS M	EMORIAL RAILROAD	. INC.	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this i	natter to the following:		
Gloria P. Keenan			
	(Name of Contact P	erson)	
Veterans Memorial Railroad, Inc.			
	(Firm/ Compan	y)	
14043 NW County Road 12			
,,	(Address)		
Bristol, FL. 32321-3266			
	(City/ State and Zip	Code)	
gkeenan@fairpoint.net			
E-mail address: (to be	used for luture annual re	port notificatio	n)
For further information concerning this matter, please	ease call;		
Gloria P. Keenan	at	850	643-6646
(Name of Contact Pe		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount mad	le payable to the Florida	Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fe Certificate of Sta	e & 🔲\$43.75 Filing Feetus — Certified Copy (Additional copy enclosed)	Certi is Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section		reet Address nendment Sect	ion _

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FILED

Articles of Amendment to Articles of Incorporation of

VETERANS MEMORIAL RAILROAD, INC.			
(Name of Corporation a	s current	ly filed with the Florida D	ept. of State)
N 17000002507			
(Docume)	nt Numbe	r of Corporation (if known))
Pursuant to the provisions of section 617,1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes	, this <i>Florida Not For Pro</i> j	fit Corporation adopts the following
A. If amending name, enter the new name of the c	<u>orporatio</u>	<u>on:</u>	
N/A			The new
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name	corporati	on" or "incorporated" or	
D. Untur new principal office address, if applicable	a.	10561 NW Theo Jacobs W	'ay
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		Bristol, FL 32321	(A)
			27
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P. O. Box 681	
		Bristol, FL 32321	- F-
D. If amending the registered agent and/or registered new registered agent and/or the new registered			the name of the
Name of New Registered Agent:	N/A		
-		(Florida s	street address)
<u>New Registered Office Addres:</u>	N/A		, Florida
_		(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered / I am fan	Ngent: niliar with and accept the o	bligations of the position.
	Sij	gnature 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.

Examp <u>X</u> Ch <u>X</u> Re <u>X</u> As	ange move	<u>V</u> .	John Doe Mike Jones Sally Smith		
Type ((Checl	of Action k One)	<u>Title</u>	Name	<u>Addres</u> s	
i)	_ Change		N/A		
	Add				
	Remove				
2)	_ Change		N/A	 	
	Add				
	Remove				
3)	Change		N/A	 	
	Add				
	Remove				
4)	Change		N/A		
	Add			 	
	Remove				
51	Change		N/A		
	Add			 	
	Remove				
6)	Change		-	 _	
	Add				
	Remove				

 If amending or adding additional Articles, enter change(s) her
--

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

ADD ARTICLE IX. DISSOLUTION OF ASSETS.

Upon the dissolution, termination or winding up of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501©(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, and/or to the Liberty County Board of County Commissioners, Liberty County School Board for a public purpose.

•	N/A	
The date of each amendn date this document was sig		, if other than the
Effective date if applicab		
	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will no on the Department of State's records.	ot be listed as the
Adoption of Amendment	(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were sufficient for	as/were adopted by the members and the number of votes east for the amendment(s) or approval.	
adopted by the board	s or members entitled to vote on the amendment(s). The amendment(s) was/were of directors. ugust 20, 2017	
Dated		
Signature	Durly B. Ref	
ha	the chairman or vice chairman of the board, president or other officer-if directors ve not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)	
	Donald B. Read	
	(Typed or printed name of person signing)	
	Chairman, Board of Directors	
	(Title of person signing)	