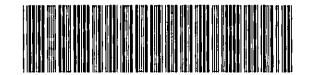
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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: ROBERT L. HAMILTON JR VETCRAME FOUNDAY	(01 T	/c
DOCUMENT NUMBER: NIS 000006513		
The enclosed Articles of Amendment and fee are submitted for filing.	2618	
Please return all correspondence concerning this matter to the following:	SEP E6	7. <u>.</u>
AltErmease S. NESBITT (Name of Contact Person)	>e_	
(Name of Contact Person)	=	
ROBERT L HAMILTON JR VETERALS FOUNDATION (Firm/ Company)	X6	
(Firm/ Company)		
5104 N. ORANGE Blossom TRL STE#110		
(		
ORLANDO, FLORIDA 328/6 (City/ State and Zip Code)		
(City/ State and Zip Code)		
ahubbart@bellsouth, net		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
1 HER MEASE S. MES BITT at (407) 879-3951  (Name of Contact Person) (Area Code) (Daytime Telephone Nu		
(Name of Contact Person) (Area Code) (Daytime Telephone Nu	mber)	
Enclosed is a check for the following amount made payable to the Florida Department of State:		
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)  \$43.75 Filing Fee Certified Copy (Additional Copy is Enclosed)		
Mailing Address Street Address		

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

## Articles of Amendment to

•	10		Ĭ	3
	Articles of Inc	_ *		رجي
Robert L. HANIIIton	of 1 TR.	VETERANS	FOLIN CLAFICN (CRD.  a Dept. of State)	ა <sup>ე</sup>
(Name of Corporation a	s currently file	d with the Florid	a Dept. of State)	
Λ	118001	00065	5/3	
••		Corporation (if kno		
Pursuant to the provisions of section 617.1006, Floric mendment(s) to its Articles of Incorporation:	la Statutes, this	Florida Not For I	Profit Corporation adopts the follow	wing
A. If amending name, enter the new name of the c	orporation:			
			The	пен
name must be distinguishable and contain the word ' 'Company" or "Co." may not be used in the name.	corporation" o	or "incorporated"	or the abbreviation "Corp." or "It	ıc. "
3. Enter new principal office address, if applicable Principal office address MUST BE A STREET AD				
	<del></del>	<del></del>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>			
). If amending the registered agent and/or registe	red office add	ress in Florida, er	iter the name of the	
new registered agent and/or the new registered	•			
Name of New Registered Agent:	nichael	J. Bailey		
Name of New Registered Agent: 5	104 M. O	range Blos	50.n St #110	
New Registered Office Address:		9 (Fiore	da street address)	
	Dulant		3701	Λ
<del>-</del>	Orlando (Cir		, Florida <u>325/1</u> (Zip Code)	
	(01.	.''	(2)p Coucy	
ew Registered Agent's Signature, if changing Re hereby accept the appointment as registered agent.			e obligations of the position.	
1	Mulail	g Bailey	ed Agent, if changing	
	Signatur	re of New Registers	ed 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: X/Change X/Remove X/Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	Herman Johnson	5104 N. DRANGE HUSSOM TR
Add Remove			Ste 1/0 OLLAND: \$L 32810
2) Change Add	<u> </u>	Michael Bailey	5104 N. DRANGE Blossom TR Ste 110
Remove 3) Change Add	<u></u>	DARYL K. August	OLLANDO JL 32810 5104 NI. OLANGE Blosson TRE #110
Remove			OFLANDO JL 32810
4) Change Add Remove	$\mathcal{T}_{-}$		5704 N. ÜLANGE Blossom TK #110 BRLANDO FL 32810
5) Change Add	<u>S</u> _	Altermense S. MesBitt	5104 Al DaAdge Blossen To
Remove			ORLANDO \$1 32810
6) Change			
Add			
Remove		Page 2 of 4	

If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)
	<del></del>
	<u> </u>
	<del></del>
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: $9/24/8$ date this document was signed.	, if other than the
Effective date if applicable: 9/24/18  (no more than 90 days after amendment file date	)
Note: If the date inserted in this block does not meet the applicable statutory filing requiren 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 was/were sufficient for approval.	the amendment(s)
☐ There are no members or members entitled to vote on the amendment(s). The amendment adopted by the board of directors.	ent(s) was/were
Dated 9/24/2018 Simon al & Neskitt	
Signature (7 - 7 ).	<del></del>
(By the chairman or vice chairman of the board, president or other of have not been selected, by an incorporator – if in the hands of a recontent court appointed fiduciary by that fiduciary)	
A I TERMEASE S. NES 13:17 (Typed or printed name of person signing	ц) 
PRESIDENT (Title of person signing)	
(True of person signing)	