N20 0000 13373

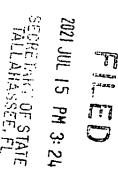
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000364378200

05/18/21--01013--011 **52.50



A. Butter

COVER LETTER

Division of Corporations NAME OF CORPORATION: MOST WOLSKIPFULFL Grandl DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) For further information concerning this matter, please call: (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 & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

TO: Amendment Section

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

Enclosed)

(Additional Copy is

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation SECRETARY OF STATE (Document Number of Corporation (if known) AMASSEE, FL 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: name must be distinguishable and contain the word "corporation" or "incorporated 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address: (City)

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: X Change X Remove X Add	PT John I V Mike J SY Sally S	<u>Iones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add		Donald Plummer	201 Carayan
Remove 2) Change Add		Don E. Plunner	301 Caravan Circle #114 Jakovillija Dalle
Remove			
4) Change Add			
Remove 5)ChangeAddRemove			
6) Change Add Remove			
	ng additional Art us, if necessary).	ticles, enter change(s) here: (Be specific)	
		NA	

·	
	1/10
The date of each amendment(s) adoption date this document was signed.	on:ifor
Effective date if applicable:	Λ/Λ
	(no more than 90 days after amendment file date)
<u>Note</u> : If the date inserted in this block do- document's effective date on the Departme	ses not meet the applicable statutory filing requirements, this date will not be listement of State's records.



2821 JUL 15 PK 4: 22

FLORIDA DEPARTMENT OF STATE Division of Corporations

July 1, 2021

HAROLD CHAMBERS MOST WORSHIPFUL GRAND & LODGE COUNSEL 2037 RIVERTREE CIR #102 ORLANDO, FL 32839 US

SUBJECT: MOST WORSHIPFUL FL GRAND LODGE & COUNSEL AASR INC.

Ref. Number: N20000013373

We have received your document for MOST WORSHIPFUL FL GRAND LODGE & COUNSEL AASR INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU HAVE COMPLETED THE WRONG AMENDMENT FORM. PLEASE COMPLETE THE ATTACHED AMENDMENT FORM.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 921A00015041