N2100006074

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SECRETARY OF STATE

A. Butter

COVER LETTER

TO: Amendment Section
Division of Corporations

Woodmen of NAME OF CORPORATION:	the World Inc Lodge 4	06		
DOCUMENT NUMBER:		<u> </u>		
The enclosed Articles of Amendment and fee	are submitted for filing			
Please return all correspondence concerning th	is matter to the followi	ng:		
Robyn Marshall				
	(Name of Cont	act Person)		
	(Firm/ Cor	mpany)		
7105 Riverbrooke St				
	(Addre	ess)		
Panama City, FL 32404				
	(City/ State and	I Zip Code)		
marshall.robyn.leann@gmail.com				
E-mail address: (to	be used for future annu	ial report notificat	on)	_
For further information concerning this matter	, please call:			
Robyn Marshall		850 at	819-8239	
(Name of Contact	Person)	(Area Code) (Daytime Telephone Num	ber)
Enclosed is a check for the following amount i	made payable to the Flo	orida Department o	of State:	
■ \$35 Filing Fee □\$43.75 Filing I Certificate of \$		py Cer copy is Cer (Ad	50 Filing Fee ificate of Status ified Copy ditional Copy is closed)	
Mailing Address Amendment Section		Street Address Amendment Se		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassec
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Woodmen of the World Inc Lodge 406

2021 JUN 29 PM 4: 03

(Name of Corporation as currently filed with the Florida D	ept. of State)	SECRETARY OF STATE
N21000006074		TALLAHASSEE, EL
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Prof</i>	Tit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
WoodmenLife Chapter 406 Panama City		The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or t	he abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	274 Forest Park Circle	
(Principal office address MUST BE A STREET ADDRESS)	Panama City, Florida 3240:	5
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 new registered agent and/or the new registered office as Name of New Registered Agent:	e address in Florida, enter ddress:	the name of the
New Registered Office Address:	(Florida st	reet aildress)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept the ob	digations of the position.
	gnature of New Registered A	gent, 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 A Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additio ts, if nece	nal Articles, enter change(s) here: ssury). (Be specific)	
-			

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						10.	- 41 41 41
The date of each amendment(s) adoption: date this document was signed.			_	_		, , , t c	omer than the
Effective date if applicable: (no n	nore than 90) days after o	ımendment	file date)		<u>.</u>	
Note: If the date inserted in this block does not document's effective date on the Department of	t meet the ap	oplicable stat	utory filing	g requiremen	its, this date	will not be lis	ted as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Dated	05/28/2021
	Opino Marcha DD
Signatur	(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)
	Robyn Marshall
	(Typed or printed name of person signing)
	(Typed of printed name of person signing)
	(Typed of printed name of person signing)
	Treasurer