## 135769

(Requestor's Name)				
(Address)				
(Ad	idress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·		
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



600301751646

09/14/17--01022--007 \*\*43.75

SECRETARY OF STATE



SEP 1 5 2017 T. LERMEUX

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Am Vets Post 178 Inc
DOCUMENT NUMBER: N25769
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
William H. Wright (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
1412 Por H Rol
142 Smith Rol (Address)
Defuniak Springs FL 32433 (City/ State and Zip Code)
(City/ State and Zip Code)
Wright lady 1995 C yahoo. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
William H. Wright at 850 530 - 4213 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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:
□\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  □\$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			
Amvets ;	Post 178 I	nc		
(Name of Corporation as			f State)	
<i>∧</i> ×	5769			
(Document	Number of Corporatio	n (if known)		
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida N</i>	Not For Profit Col	rporation adopts the t	ollowing
A. If amending name, enter the new name of the co	rporation:			
				The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorp	orated" or the ab	breviation "Corp." o	r "Inc."
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADD</u>	RESS )			
	<del> </del>			
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX	<u>x</u> )			
	-			
D. If amending the registered agent and/or registere	ed office address in Fl	orida, enter the n	name of the	
new registered agent and/or the new registered of			<del></del>	
Name of New Registered Agent:	William H	1. Wright		
-	William H	. LCI 1		<del></del>
	THE SMIT	(Florida street ad	ldress)	
New Registered Office Address:		·	•	
	Defuniar ,	Parinas	.Florida ♂≥ 9	93
	(City)	7	(Zip Code)	
New Registered Agent's Signature, if changing Regi	istared Agent:			
hereby accept the appointment as registered agent.		accept the obligati	ions of the position.	
/ L	Vill X	1. 1020	X = :	
	Signature of New	Registered Agent.	if changing	
		·	Dir.	g
			AS T	
	Page 1 of 4		S S S S S S S S S S S S S S S S S S S	! !
			<u> </u>	سر م
			<u> </u>	استا
			46.2	<del></del>

## 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	V Mik	n <u>Doe</u> se <u>Jones</u> ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	William H. Wright	142 Smith Rd
<u>✓</u> Add			Defunca Springs FL
Remove			32433
2) Change	_ <i>P</i>	J. Wayne Brown	1759 Red Hill Rd
_v_ Add			Ponce De Leon, FL
Remove			32455
3) Change		Theodore Held	160 E Dogwood Ave
Add			Defuniak Springs, FL
Remove			32433
4) Change		Bob Beyer	18 Tall Pines Blud
Add			P.O. Box 1485
Remove			Defusiar Springs, AZ 32433
5) Change	CFO	Terry Bolin	271 Pleasant Ridge Rd
Add			Defuncie Springs, FL
Remove			32433
6) Change		Charles Wright	532 Paradise Island
Add			Defuniak Springs, FL
Remove			32433

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
	, , , , , , , , , , , , , , , , , , ,
	The state of the s
	A CONTRACTOR OF THE CONTRACTOR

The date of each amendment(s) add date this document was signed.	option:			, if other than the
Effective date if applicable:	9_6_ (no more than 9)	2017	mendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the ap	pplicable statu		
Adoption of Amendment(s)	( <u>CHECK ONE</u>	.)		
The amendment(s) was/were add was/were sufficient for approval		and the numb	er of votes cast for the	amendment(s)
There are no members or membadopted by the board of director		the amendmen	nt(s). The amendment	(s) was/were
Dated	9-6-201	7		
Signature ///	then &	t 4	12/5	<u> </u>
	nan or vice chairman on selected, by an incorp			
	ppointed fiduciary by	•		i, itusice, oi
	William (Typed o	or printed nan	Vright ne of person signing)	<del></del>
	Chair	man		
<u>-</u>		(Title of p	erson signing)	<del></del>