N31997

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SECRETARY OF STATE PLORID.

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: B&S Combs Lodge # 1599	
DOCUMENT NUMBER: N-31997	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning t	his matter to the following:
Robert L. Weatherspoon	
(Name of	Contact Person)
B&S Combs Elks Lodge # 15	99
(Firm	n/ Company)
P.O. Box 3605	
(,	Address)
Lake City, Florida 32056	
(City/ Sta	te and Zip Code)
For further information concerning this matter	r, please call:
Robert L. Weatherspoon	at (386) 752-8292
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
✓ \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & 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

B&S Combs Elks Lodge # 1599 , Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

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CRETARY OF STATE
CAHASSEE, FLORID

N-31997

(Document number of corporation (if known)

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:

NEW CORPORATE NAME (if changing):

(Attach additional pages if necessary) (continued)

The date of adoption of the amendment(s) was: 12/28/07	
Effective date if applicable: 12/28/07	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	as (were) adopted by the members and the number of votes cast as sufficient for approval.
	s or members entitled to vote on the amendment. The ere) adopted by the board of directors.
have not been select	r vice chairman of the board, president or other officer- if directors cted, by an incorporator- if in the hands of a receiver, trustee, or ed fiduciary, by that fiduciary.)
Robert L. Wea	atherspoon
(Тур	ed or printed name of person signing)
President	
	(Title of person signing)

FILING FEE: \$35