N33409

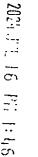
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COVER LETTER

TO: Amendment Section Division of Corporations

SPRING HILL FR NAME OF CORPORATION:	RATERNAL ORDER OF EAGLES AERIE 4208, INC.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
DEBORAH STARK	
	(Name of Contact Person)
SPRING HILL FRATERNAL ORDER OF EAGLI	ES AERIE 4208, INC.
	(Firm/ Company)
8517 BOLTON AVENUE	
	(Address)
HUDSON, FL 34667	
	(City/ State and Zip Code)
aeriesecretary4208@gmail.com	
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, plea	se call:
Deborah Stark	727 967-1097
(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 □\$43.75 Filing Fee & Certificate of Status	
Mailing Address	Street Address

Mailing Address

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 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida	a Dept. of State)
N33409 SPRING HILL FRATERNAL ORDER OF EAG	LES AERIE 4208, INC.
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statiamendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	
name must be distinguishable and contain the word "corpor	The new ration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	fice address in Florida, enter the name of the address:
Name of New Registered Agent:	N/A
New Registered Office Address:	(Florida street address)
	(City) , Florida
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am j	
	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: XChange X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>T</u>	SHARON DOWLING	8517 BOLTON AVENUE HUDSON, FL 34667
x Remove			
2) Change × Add	<u>T</u>	JASON DOWNING	8517 BOLTON AVENUE HUDSON, FL 34667
Remove 3) Remove 4dd Remove			
4) Change Add		· - <u></u>	
Remove			
5) Change Add		•	
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific) N A	

1 : 1				
				
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			<u> </u>	
		. 10		
The date of each amendment (date this document was signed.	(s) adoption:	N/H		, if other than the
Effective date if applicable:	06-09-2024			
	(no more the	an 90 days after amend	lment file date)	<u>-</u>
Note: If the date inserted in thi document's effective date on the	s block does not meet to be Department of State's	the applicable statutory s records.	filing requirements, this d	ate will not be listed as the
Adoption of Amendment(s)	(CHECK (ONE)		

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

Dated	
Signature	Deborah Stark
	(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)
	other court appointed fiduciary by that fiduciary)