N3841/

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

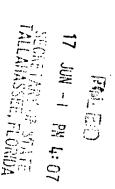
Office Use Only



700299358257

06/01/17--01009--025 ***35.00

JUN 0 6 2017 S. YOUNG



COVER LETTER

TO: Amendment Section **Division of Corporations** ORANGE LAKE POST NO. 10733 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC. **SUBJECT:** Name of Corporation The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: GEORGE A ARMENTEROS Name of Contact Person ORANGE LAKE POST NO. 10733 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC. Firm/Company **PO BOX 607** Address ORANGE LAKE FL 32681 City/State and Zip Code georgearmentros@me.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: George A Armenteros 702-2050
Area Code & Daytime Telephone Number Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address: Street Address:** Amendment Section Amendment Section **Division of Corporations Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organi	•	•
	r to change its registered office or register		
	Post Name; ORANGE LAKE POST NO. 107	33 VETERANS OF FOREIGN WARS OF	THE UNITED STATES, INC
1. The name of	office address: 19241 N Us Hwy 4	141	
	office address: 1924 111 OS 11Wy 4		. , . , . , . , . , . , . , . , . , . ,
			
3. The mailing a	ddress (if different): PO Box 607		
	Lake FI 32681		
4. Date of incom	poration/qualification: 06/01/1990	Document number: N3841	1
	I street address of the current registered ag tment of State: (If resigned, enter resigned	•	th the
	Toney Weeks (Resigned)		
		,	
			7 28 7
6. The name and (if changed):	l street address of the new registered agent	t (if changed) and /or registered of	fice All All All All All All All All All Al
	George A Armenteros		
	18545 NW 45th Ave Rd	,	2 2 0 m
	P.O. Box NOT a	acceptable	FA TEO
	Citra Fl 32113		7
The street address changed will	ess of its registered office and the street a be identical.	ddress of the business office of its	s registered agent,
Such change wa authorized by th	is authorized by resolution duly adopted to board, or the corporation has been not in the corp	by its board of directors or by an offied in writing of the change.	officer so
Signatu	re of an officer or director	Timmothy C Simmons Printed or typed name and titl	c .
performance of	the appointment as registered agent and to comply with the provisions of all status my duties, and I am familiar with and act is document is being filed merely to reflect that the corporation has been notified in	cept the obligation of my position	as registerea
Degree	Mature of Registered Agent	May 29 2017	
If signing on be	half of an entity:		
Т	yped or Printed Name	•	

* * * FILING FEE: \$35.00 * * *