N38577

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

name of corporation: <u>Pawhe</u>	LLENIC FEDE	FRATION OF FL. INC.
DOCUMENT NUMBER:	38577	
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Wick ANTO		
Nick ANTO	(Name of Contact Pers	on)
PANHELLENIE 7	ENATIO	ON OFFL. INC.
	(Firm/ Company)	
1919 Dun	ref -	CR
1919 Dun	(Address)	
DUNEDIN	FL	34698 de)
	(City/ State and Zip Co	de)
NAA 1919	WGI	MAIL COM
E-mail address: (to be used	d for future annual repor	t notification)
For further information concerning this matter, please	call:	
Nick Angow	at _	## 727 - 871 - 6768 Area Code) (Daytime Telephone Number)
(Name of Contact Persor	(/	Area Code) (Daytime Telephone Number)
inclosed is a check for the following amount made pa	ayable to the Florida De	partment of State:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & Certificate of Status		
Mailing Address Amendment Section		t Address
Division of Corporations P.O. Box 6327	Divis	ion of Corporations on Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

of

(Name of Corporation as c	urrently filed with the Florida Dept. of State)
<i>N</i> 3	38 5 7 7
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Simendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	poration:
	The new
Company" or "Co," may not be used in the name.	rporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDR	ESS)
2. Enter new mailing address, if applicable:	i.
(Mailing address MAY BE A POST OFFICE BOX)	
	; ; ;
) If amonding the goalet	
 If amending the registered agent and/or registered new registered agent and/or the new registered off 	l office address in Florida, enter the name of the
	nee address.
Name of New Registered Agent:	
N. D. J. Joseph J. J.	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registo	ared Avent.
hereby accept the appointment as registered agent. La	on familiar with and accept the obligations of the position.
V	, and a second of the formation

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.

The state of the s	over and samy sm	ini, 5 r us un Auu.		
Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change Add Remove	<u>PR.</u>	MICHAEL	- ALEXAND	PROU 7 N PINELLAS AV TARPON EPRIMAS FL 34689
2) Change Add	PA	# Povi	LLAS, MAI	e/A
Remove 3) Change Add Remove	<u>vp</u>	GEORGI	ADIS, ANGL	WA
4) Change Add Remove	VP	KATZO	VLI, JOAT	TARPON & PAINUS TO 34689
5) Change Add Remove				
6) Change Add Remove				

f amending or adding additional Artitach additional sheets, if necessary).	(Be specific)	
		—
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<u> </u>		_
	No. 100 100 100 100 100 100 100 100 100 10	

Çhe date	e date of each amendment(s) adopt this document was signed.	on:	, if other than the
Eff	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date	18
<u>Not</u> loc		oes not meet the applicable statutory filing require	ments, this date will not be listed as the
A do	option of Amendment(s)	(<u>CHECK ONE</u>)	
4	The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for	the amendment(s)
	There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendn	nent(s) was/were
	Dated	-10-18	
	Signature Work	Auton	
	have not been se	or vice chairman of the board, president or other o lected, by an incorporator – if in the hands of a rec- inted fiduciary by that fiduciary)	fficer-if directors eiver, trustee, or
		ICK ANTON (Typed or printed name of person signing)	- - - - (g)
		TREASURE (Title of person signing)	<u>-K</u>