N39935

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON:	ER OF EAGLES, A	EKIES #4231	, INC		_
DOCUMENT NUMBER:	N39935					_
The enclosed Articles of Art	nendment and fee are sub	mitted for filing.				
Please return all corresponde	ence concerning this matt	er to the following:				
DONA M ZEFFERY						
		(Name of Contact P	erson)			-
FRATERNAL ORDER OF	EAGLES AERIES 4251					
		(Firm/ Compan	y)			_
8350 E HWY 25						
		(Address)				-
BELLEVIEW FL 34420						
4		(City/ State and Zip	Code)			_
EAGLES4251@YAHOO.C	СОМ					
<u>F</u>	-mail address: (to be used	d for future annual re	port notificat	ion)		_
For further information cond	cerning this matter, please	e call:			200	989
DONA M ZEFFERY		at	352	347-5994	CRE	2623 JUN
	(Name of Contact Person		(Area Code) (Daytime Telepho	one Number)	20
Enclosed is a check for the	following amount made p	ayable to the Florida	Department of	of State:		프
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Cer is Cer (Ad	.50 Filing Fee tificate of Status tified Copy ditional Copy is closed)	E, FL	2: 06
Mailing /	Address	St	reet Address	3		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

(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 imendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, If applicable: Principal office address MUST BE A STREET ADDRESS) C. Enter new mailling address, If applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (City) (City) (Zip Code) (City) New Registered Agent's Signature, If changing Registered Agent: thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		N39935	
The new ame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." Company" or "Co." may not be used in the name. 5. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS 6. Enter new mailing address MUST BE A STREET ADDRESS 7. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX) 8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) (Florida street address) (City) (Zip Code) (Zip Co	(Documen	t Number of Corporation (if known)	
The new ame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." Company" or "Co." may not be used in the name. 5. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) 6. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 7. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) (City) (Zip Code) (Tip Code)		a Statutes, this Florida Not For Profit Corporation adopts th	e following
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Name of New Registered Agent: Name of New Registered Agent:			
Name of New Registered Agent: Name of New Registered Agent:			
Name of New Registered Agent: Solution	. If amending the registered agent and/or register		
New Registered Office Address: (Florida street address) Florida (City) (Zip Code)		office address:	
New Registered Office Address: (City) (Zip Code) (Tity) (Sip Code)	new registered agent and/or the new registered	office address.	
New Registered Office Address: (City) (Zip Code) (Tity) (Sip Code)		OTHER AUGUSTS	
(City) (Zip Code) (City) (Zip Code)		OTHER AUGUSTS.	<u> </u>
(City) (Zip Code) (City) (Zip Code)	Name of New Registered Agent:		\$1001E
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lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Name of New Registered Agent:	(Florida street address) , Florida	. - .
nereny accept the appointment as registered agent. I am jumitar with and accept the onligations of the position.	Name of New Registered Agent: New Registered Office Address:	(Florida street address) , Florida (City) (Zip Code)	
in the second	Name of New Registered Agent: New Registered Office Address: www. Registered Office Address: www. Registered Agent's Signature, if changing Reg	(Florida street address) , Florida(City) (Zip Code)	
	Name of New Registered Agent: New Registered Office Address: www. Registered Office Address: www. Registered Agent's Signature, if changing Reg	(Florida street address) , Florida(City) (Zip Code)	

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	PT John Do V Mike Jo SV Sally Sr	ones	I
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	PAUL LIVINGSTON	3735 SE 93RD PL OCALA FL 34480
Remove			
2) x Change Add	<u>s</u>	DONA ZEFFERY	8787 SE 136 PL SUMMERFIELD FL 34491
Remove 3) Remove Add Remove	<u>TR</u>	LUKE SUMMERALL	12379 SE 88TH CT BELLEVIEW FL 34420 8787 SE 136 PL
4) × Change Add	<u>v</u>	JOHN ZEFFERY	CHMMEDELLI DEL 24401
Remove 5) Change	TR	JOE HOLDEN	2000 SE 183RD TER SILVER SPRINGS FL 34488
Remove 6) Change Add	<u>T</u>	PHYLLIS HUFFSTETTER	11470 SE 73RD CT BELLEVIEW FL 34420
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)	
		AT 8772 136 PL SUMMERFIELD FL 34491	
ADD MONICA SMITH	TREASURER 104	459 SE 143RD ST SUMMERFIELD FL 3449	71

	
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	2023 SEC
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	06 ATI
	111
The date of each amendment(s) adoption: 6/01/2023 ate this document was signed.	, if other than the
06/01/2023	1
Affective date if applicable: (no more than 90 days after amendment file	'e date)
Note: If the date inserted in this block does not meet the applicable statutory filing relocument's effective date on the Department of State's records.	

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

Adoption of Amendment(s) (CHECK ONE)

	6/12/2023
Dat	ed
Sig	nature 1000a m Zylery
	(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 tiduciary)
	DONA M ZEFFERY
	(Typed or printed name of person signing)
	SECRETARY
	(Title of person signing)

2023 JUN 20 PM 2: 06