N47204

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Anero & N. C. C.COULLIETTE

JAN 04 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Veterans of Foreign Wars of the United States, Inc.					
DOCUMENT NUI	MBER: N47204				
The enclosed Articl	es of Amendment and fee are sub	mitted for filing.			
Please return all cor	respondence concerning this matt	er to the following:			
	· · · · · · · · · · · · · · · · · · ·	DON HEINZ			
	(Name of	Contact Person)			
	VFW POST 5450				
	(Firm/ Company)				
	2240 West JAMES LEE BLVD				
	(Address)				
	CRESTVIEW, FL 32536				
	(City/ State and Zip Code)				
		est.gccoxmail.com			
	E-mail address: (to be used	I for future annual report notificat	ion)		
For further informat	ion concerning this matter, please	call:			
SHELDON HEIN	IZ	at (850) 682-5552			
(Nam	e of Contact Person)	(Area Code & Daytime	e Telephone Number)		
Enclosed is a check	for the following amount made pa	ayable to the Florida Department of	of State:		
■\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy		
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Street Address Amendment Section Division of Corporation Clifton Building	is enclosed)		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Crestview, Post No. 5450, Veterans of Foreign Wars of the United States Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

(Name of Corporation as currently filed with	th the Florida Dept. of State)
N47204	
(Document Number of Corpo	ration (if known)
ursuant to the provisions of section 617.1006, Florida Statute following amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts
. If amending name, enter the new name of the corpora	ition:
VETERANS OF FOREIGN WAR	RS OF THE US, INC.
he new name must be distinguishable and contain the wo bbreviation "Corp." or "Inc." <u>"Company" or "Co." may t</u>	•
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	2)
	<u></u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1 JAN -3
	3 CR
If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	ice address in Florida, enter the name of the
Name of New Registered Agent: SPA	NGLER, LYLE D.
42	272 CARR RD
New Registered Office Address: (Flo	orida street address)
	HOLT , Florida 32564
	(City) (Zip Code)
sition.	Agent: m Jumfliar with and accept the obligations of the which is the content of

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
DP	HINDALL, TERRY K.	111 WILDHORSE DR CRESTVIEW, FL 32536	☐ Add ☐ Remove
DP	SPANGLER, LYLE D.	4272 CARR RD HOLT FL 32564	
 .			☐ Add☐ Remove
E. If amend (attach ad	ing or adding additional Articles, edditional sheets, if necessary). (Be s	nter change(s) here: pecific)	
- Constitution of the Cons			
, , , , , ,		11 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	

The date of each amendment(s) adoption:	(date of adoption is required)				
•	(date of adoption is required)				
Effective date <u>if applicable</u> :					
(no more than 90 days after amendment file date)					
Adoption of Amendment(s) (CH	ECK ONE)				
The amendment(s) was/were adopted by the was/were sufficient for approval.	members and the number of votes cast for the amendment(s)				
There are no members or members entitled adopted by the board of directors.	to vote on the amendment(s). The amendment(s) was/were				
Dated DECEMBER 9, 20 Signature	19				
(By the chairman or have not been selected	vice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or I fiduciary by that fiduciary)				
	LYLE D. SPANGLER				
(Тур	ped or printed name of person signing)				
	DP				
	(Title of person signing)				

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