

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN EVERGLADES OUTPOST, INC.

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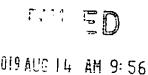
Corporate Filing Menu

C. GOLDEN

Help

AUG 1 5 2019

Articles of Amendment to Articles of Incorporation of



	Articles of Incorporation of	2019 AUG 14 AF
	Everglades Outpost, Inc.	
(Name of Corporation a	s currently filed with the Flor	ida Dent, of State)
	N9300000868-	•
(Docume	ent Number of Corporation (if kg	aowa)
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	1a Statutes, this Florida Not Fo.	r Profit Corporation adopts the following
A. If amending name, enter the new name of the c	corporation:	
		The new
name must be distinguishable and contain the word ' "Company" or "Co," may not be used in the name.	'corporation" or "incorporatea	l" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable		
(Principal office address MUST BE A STREET AD	DRESS)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	<u>ox</u>)	-
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida.	enter the name of the
new registered agent and/or the new registered	1 oince address:	
Name of New Registered Agent:		
No. Poster of Office All Con-	(FI	orida street address)
New Registered Office Address:		
-		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re	gistered Agent:	
I hereby accept the appointment as registered agent.	I am familiar with and accept	the obligations of the position.
	Signature of New Regist	ered Agent, if changing

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If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
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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.

X Change X Remove X Add	PT John I V Mike SV Sally 9	lones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Title P	Wayne Rassner	35601 SW 192 Ave.
Add Remove			Florida City, FL 33034
2) Change	Title Board Hember	Joseph A. Wasilewski	24305 S.W. 142 Avenue
Add X Remove			Princeton, FL 33032
3) Change Add	P	Robert W. Freer, Jr.	35601 SW 192 Ave. Florida City, FL 33034
Remove			
4) Change Add			
Remove Change			
Add Remove			\
6) Change			•
Remove			

The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :	•	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the D	lock does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes east for the amen	dement(s)
There are no members or mer adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) wasters.	s/were
Dated	<u>8/14/19.</u>	
Signature 1/10	un low	
have not b	tionan or vice chairman of the board, president or other officer-if d seen selected, by an incorporator — if in the hands of a receiver, trust t appointed fiduciary by that fiduciary)	
	Wayne Rusiner (Typed or printed name of person signing)	
	THE-President	

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