## N9500002575

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Amend

SEP 1.2 2018

I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations Lions of District 35-O Hearing Program, Inc. NAME OF CORPORATION: \_ N95000002575 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: D. Comeau (Name of Contact Person) (Firm/ Company) 6 Woodfield Circle (Address) Homosassa, FL 34446 (City/ State and Zip Code) CentralFloridaLionsHearing@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: D. Comeau 352 382-0619 (Daytime Telephone Number) (Name of Contact Person) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed)

**Mailing Address** 

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

LIONS OF DISTRICT 35-0 HEARING PROGRAM, INC.

(Name of Corporation as curre	ently filed with th	e Florida Dept. of State)	•
N95000	202575	<u> </u>	
(Document Num	nber of Corporatio	n (if known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	utes, this <i>Florida i</i>	Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corpora	ation:		
N/A			The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorp	porated" or the abbreviatio	
B. Enter new principal office address, if applicable:	N/A		
(Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>s</u> )		74 ja 63
			- T
	<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		55 5
[maining dam on <u>main 2011 1021 011122 2011</u> ]			7
	<del></del>		- <del> </del>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		orida, enter the name of t	he he
N/A			
Name of New Registered Agent:			·
(Florida street address) New Registered Office Address:			
rew hegistered office made ess.			
· · · · ·	(City)	, Flori	da p Code)
	(Cuy)	(2)	p Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am j		accept the obligations of th	e nosition
	,		- r
	Signature of New	Registered Agent, if chang	ing

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	<u>V</u> <u>Mi</u>	on Doe ke Jones lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Pres.	Raymond Grimes	
Add X Remove			
2) Change	VP	Daniel Fox. Sr.	
Add X Remove			
3) X Change	VP	Ray Siracusa	1490 Casey Lane
Add			Port Orange, FL 32129
Remove			
4) Change	VP	Linda Grimes	PO Box 528
X Add		<del></del>	Tangerine, FL 32777
Remove			<del> </del>
5) <u> </u>	Pres	Gwyneth Wilson	PO Box 866
X Add		<del></del>	DeLand, FL 32721
Remove			
6) Change	Sec	Dennis Dulniak	1772 Carillon Park Drive
X Add			Oveido, FL 32765
Remove			

(Be specific)
<del></del>
nange, reclassification, or cancellation of issued shares,
ndment if not contained in the amendment itself:
<del></del>

June 21, 2018	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated Sept. 1, 2018	
Signature Janu Amen	
(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 fiduciary)	1
Dana Comeau	
(Typed or printed name of person signing)	
Treasurer	
(Title of person signing)	