

AUG 11 2015
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Air Force Enlisted Village, Inc.

DOCUMENT NUMBER: N97000007080

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christina Gammon, Executive Assistant

(Name of Contact Person)

Air Force Enlisted Village, Inc

(Firm/ Company)

92 Sunset Lane

(Address)

Shalimar, FL 32579

(City/ State and Zip Code)

gammon@afev.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christina Gammon

850

651-3766 ext 111

(Name of Contact Person)

at

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2015

CHRISTIANA GAMMON
AIR FORCE ENLISTED VILLAGE, INC.
92 SUNSET LANE
SHALIMAR, FL 32579

SUBJECT: AIR FORCE ENLISTED VILLAGE, INC.
Ref. Number: N97000007080

We have received your document for AIR FORCE ENLISTED VILLAGE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 115A00014594

Articles of Amendment
to
Articles of Incorporation
of

Air Force Enlisted Village, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N97000007080

(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 amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A 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)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Brooke P. McLean

92 Sunset Lane

(Florida street address)

New Registered Office Address:

Shalimar

(City)

Florida 32579

(Zip Code)

New Registered Agent's Signature, If changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

FILED STATE
SECRETARY OF STATE
DIVISION OF CORPORATE
2015 AUG 11 PM 4:28

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>PCEO</u>	<u>Mr. Brooke P. McLean</u>	<u>92 Sunset Lane</u>
<input checked="" type="checkbox"/> Add			<u>Shalimar, FL 32579</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>PD</u>	<u>Mr. James C. Binnickor</u>	<u>2037 Grayson Dr.</u>
<input type="checkbox"/> Add			<u>Navarre, FL 32566</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>DT</u>	<u>Mrs. Jennifer S. Carron</u>	<u>202 Raptor Dr.</u>
<input type="checkbox"/> Add			<u>Crestview, FL 32536</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>VCD</u>	<u>Mr. Bobby Barksdale</u>	<u>117 Glade Dr.</u>
<input type="checkbox"/> Add			<u>Tallahoma, TN 37388-3645</u>
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

NA

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 not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____,"
(voting group)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 28 JUL 2015

Signature

Dennis D. Nicholson
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

DENNIS D Nicholson
(Typed or printed name of person signing)

Chairman of Board
(Title of person signing)