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WASSEF, FI

03/25/24

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of <b>florida</b> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: AUGUSTUS RUSER JR. POST NO. 273 THE AMERICAN LAGION INC.
2. The principal office address: 608 AMBRICAN LEGION PR
MADEIRA BEACH, FL 33708
3. The mailing address (if different):
4. Date of incorporation/qualification: 12/20/2017 Document number: 7/16 2 6
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
MICHAEL HAYGOOD
GOO AMERICAN INCION DR
MADRIRA BEACH, FA 33708
6. The name and street address of the new registered agent (if changed) and /or registered offlice (if changed):
ANTHONY TORREGIQUES A DE COMPANDE P.O. Box NOT acceptable
MADEIRA BRACH, FL 33708
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director  DAN KOKER POST 273 ADJUTANT Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.
Signature of Redistered Agent Dark
If signing on behalf of an entity:
Typed or Printed Name  * * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E(45 (04/13)

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

Name of Corporation	NO. 273 THE AMERICAN	<u> LEGI</u>	in, Ind
DOCUMENT NUMBER: 7//6 26			
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted	d for filir	ng.
Please return all correspondence concerning this matte	r to the following:		
DAN KOKER  Name of Contact Person  AMERICAN LEGION POST 273  Firm/Company			
Address AMERICAN LEGION DR	<del></del>	:	
MROEIRA BRACH, FL 33708 City/State and Zip Code  ADJUTANT 273 QG  E-mail address: (to be used for future annual report			je: 1 7 25
ADJUTANT 273 QG	MAIL . COM	<u>کئے ۔</u>	70
E-mail address: (to be used for future annual repor	rt notification)	IF STAT	M 12: 2
For further information concerning this matter, please	call:	. Ed	œ
PAN KOKER  Name of Contact Person	at ( <u>777 ) 398</u> Arca Code & Daytimo	5680 L	Ext 1 one Number
Enclosed is a \$35.00 check made payable to the Depar	tment of State.		
Mailing Address: Amendment Section	Street Address: Amendment Section		

**Division of Corporations** 

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327