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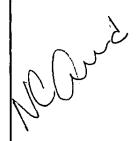


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COVER LETTER

| TO: Amendment Section Division of Corporations | |
|--|--|
| SUBJECT: Columbia County Americ | can Legion Auxiliary Unit 57, Inc. |
| DOCUMENT NUMBER: N050000042 | 97 |
| The enclosed Articles of Correction and fee | are submitted for filing. |
| Please return all correspondence concerning | this matter to the following: |
| IRMA WERKLI | |
| Name of Contact Person | Andress in a community of the state |
| American Legion Auxiliary Columbia Co | unty Unit 57,Inc. |
| Firm/Company | auguste i population in manifestation in the |
| Post Office Boy 1846 | |
| | |
| iwehrli@bellsouth.net | |
| E-mail address: (to be used for future annual repo | rt notification) |
| For further information concerning this matt | ter, please call: |
| Name of Contact Person | at (386) 755-3814 Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amour | nt: |
| ▼ \$35.00 Filing Fee | \$43.75 Filing Fee & Certificate of Status |
| \$43.75 Filing Fee & Certified Copy | \$52.50 Filing Fee, Certificate of Status & Certified Copy |
| Mailing Address: Amendment Section | Street Address: Amendment Section |

Tallahassee, FL 32301

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations
Clifton Building
2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation of

COLUMBIA COUNTY AMERICAN LEGION AUXILIRY UNIT 57, INC.

| N0500004297 (Document Number o | f Corporation (if known) | | _ |
|---|---------------------------------------|--|--------------|
| Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation: | la Statutes, this <i>Florida No</i> | et For Profit Corporation adopts the | e following |
| A. If amending name, enter the new name of the c | | OUNTY LINIT 57 INC | • |
| AMERICAN LEGION AUXILIAR name must be distinguishable and contain the word ' "Company" or "Co." may not be used in the name. | | | |
| B. Enter new principal office address, if applicable | _{le:} na | | |
| (Principal office address MUST BE A STREET AD | | 7.5 | ੋ 7 5 |
| | | | |
| C. Enter new mailing address, if applicable: | | | الم الم |
| (Mailing address MAY BE A POST OFFICE Be | ox) na | in the second se | |
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| | · · · · · · · · · · · · · · · · · · · | | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered | | rida, enter the name of the | • |
| Name of New Registered Agent: na | | | |
| | (Florida street addre. | (27 | |
| New Registered Office Address: | 15. | , | |
| na , | · | , Florida | |
| | (City) | (Zip Code) | |
| New Registered Agent's Signature, if changing Reliable I hereby accept the appointment as registered agent. | | ccept the obligations of the position | |
| NA | | | |
| Signature of N | lew Registered Agent, if ch | anging | |

Page 1 of 4

| The date of each amendment(s) ac | loption: <u>W</u> | 6-29-12 | |
|--|--------------------------------|----------------------------|--|
| Effective date if applicable: 1/h | is date | | |
| , . , | (no more than 90 days | s after amendment file da | te) |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| The amendment(s) was/were as was/were sufficient for approve | | ne number of votes cast fo | r the amendment(s) |
| | | | |
| There are no members or mem | | nendment(s). The amend | ment(s) was/were |
| adopted by the board of direct | ors. | | م ، ا |
| 5 | 0 | | • |
| Dated June | 29 2012 | | |
| Signature | ma 11 | ephli | The state of the s |
| | rman or vice chairman of the | | |
| | en selected, by an incorporate | | ceiver, trustee, or |
| other court | appointed fiduciary by that fi | ductary) | • |
| IRM | IA WEHRL | | • |
| · | (Typed or printed name of p | erson signing) | |
| By-La | aws chai | RMAN | · · |
| 0 - / | (Title of person signing) | | · |

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