(Requestor's Name)
(Address)
(Address)
(Marcos)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300110142943

10/03/07--01033--009 **87.SU

O7 OCT -3 PM 4: 46
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

10139

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	American	Legion	Auxiliary,	Unit #273. 4E- <u>MUSTINCLU</u>	Inc.	
	(P	ROPOSED (CORPORATE NAM	1E – <u>MUST INCLU</u>	DE SUFFIX)	

and one(1) copy of the Art	icles of Incorporation and	a check for:		
\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL COPY REQUIRED		
	\$78.75 Filing Fee & Certificate of	Filing Fee & Filing Fee Certificate of & Certified Copy Status		

FROM:	Betty M. Tate					
	Name (Printed or typed)					
	8523 101st Avenue No.					
	Address					
	Seminole, Florida 33777 City, State & Zip					
	City, State & Zip					
	(727) 397-4298					
	Daytime Telephone number					

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

NAME ARTICLE I

The name of the corporation shall be:

American Legion Auxiliary, Unit #273, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 600 American Legion Drive, Madeira Beach, FL 33708

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To support the American Legion programs for veterans, young people, and community, and to carry out the mission of the American Legion Auxiliary as set forth in the Mission Statement published by the American Legion Auxiliary, Nation Headquarters.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Auxiliary directors are selected from and elected by the membership.

ARTICLE V	INITIAL	DIRECTORS	AND/OR	OFFICERS

List name(s), address(es) and specific title(s):

Charlotte Mahoney 4550 Cove Cr. #809, St. Petersburg, FL 33708 -President

4525 Cove Cr. #106, St. Petersburg, FL 33708 -1st Vice-Emily Kisyk

President

Total State of the State of the

Cher Easley 4750 Cove Cr. #503, St. Petersburg, FL 33708 - Secretary Betty M.Tate

8523 101st Ave.N., Seminole, FL 33777 -Treasurer

ARTICLE VI __ INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

4750 Cove Cr. #503, St. Petersburg, FL 33708 Cher Easley

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Cher Easley

4750 Cove Cr. #503, St. Petersburg, FL 33708

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

October 2. 2007

Date

October 2, 2007

Date