N08000005514

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: American	Legion Aux	liary Unit 155 Inc.
DOCUMENT NUMBER: NO800005	514	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Elizabeth Krusynski		
<u></u>	(Name of Contact Person	n)
American Legion Auxilia	ry Unit 155,	Inc.
	(Firm/ Company)	
P O Box 388		
	(Address)	
Crystal River, FL 34423-	0388	
	(City/ State and Zip Code	e)
pkrusynski@tamp	•	
E-mail address: (to be used For further information concerning this matter, please	•	nounication)
Liz Krusynski	_{at} 352	628-7743
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$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	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of

American Legion Auxiliary U	.,				
(Name of Corporation as currently filed N08000005514	l with the Flo	rida Dept. of Stat	<u>e</u>)		
(Document Numl	ber of Corpore	ation (if known)			
Pursuant to the provisions of section 617.1006, Famendment(s) to its Articles of Incorporation:	Florida Statute	s, this <i>Florida Not</i>	For Profit Corporation	on adopts the f	following
A. If amending name, enter the new name of					
American Legion Auxiliary Bla	anton - T	hompson L	Jnit 井155,エ	nc.	The new
name must be distinguishable and contain the we "Company" or "Co." may not be used in the na	ord "corporat	ion" or "incorpor	ated" or the abbreviat	ion "Corp." o	r "Inc."
B. Enter new principal office address, if appli	icable:	N/A		No.	
(Principal office address MUST BE A STREET		W. S. L. C.		E	12
				18 (18) 2 (18)	. S
				- 21	<u>+</u> =
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	EE BOX)	N/A		7	1 Hd 1-1-10
					<u> </u>
				3 A TT	-
D. If amending the registered agent and/or re new registered agent and/or the new registered			ida, enter the name o	<u>f the</u>	
Name of New Registered Agent:	4				
New Registered Office Address:		(Florida street address	,		
N/A	A		Florido		
	(City)		, Florida (Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag			eept the obligations of	the position.	
Signature	of New Regist	ered Agent, if char	nging		

Page 1 of 4

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	<u>PT</u>	John Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1) Change Add Remove		_			N/A
2) Change Add Remove					
3) Change Add Remove		_		 	
4)Change Add Remove					
5) Change Add Remove		_		_ 	
6) Change Add Remove	• •••••••••			_ _ _	

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
N/A		
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· Fhe	date of each amendment(s) adoption: May 22, 2012
Effe	ective date if applicable: May 22, 2012
	(no more than 90 days after amendment file date)
A do	option 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 June 01, 2012
	Signature Usabeth M. Krusenski
	(By the mairman 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)
	Elizabeth M. Krusynski
	(Typed or printed name of person signing)
	Treasurer
	(Title of person signing)