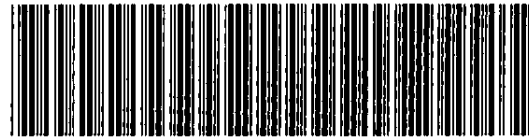


N090000000452



900211788779

09/09/11--01030--019 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
11 SEP -9 AM 10:06

Amend
@ 9/15/11

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: American Legion Auxiliary, Cooper City
Memorial Unit 321, Inc
DOCUMENT NUMBER: N09000000452

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

Please return all correspondence concerning this matter to the following:

Patricia Anderson

(Name of Contact Person)

American Legion Unit 321

(Firm/ Company)

9081 SW 51st

(Address)

Cooper City FL 33328

(City/ State and Zip Code)

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

For further information concerning this matter, please call:

Pat Anderson

(Name of Contact Person)

at (954) 4340965

(Area Code & Daytime Telephone Number)

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

American Legion Auxiliary, Cooper City Memorial Unit 321
(Name of Corporation as currently filed with the Florida Dept. of State) INC

N09 006000 452
(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:

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)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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:

PATRICIA ANDERSON

New Registered Office Address:

9081 SW 51st
(Florida street address)

Cooper City, Florida 33328
(City) (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.

Patricia A Anderson
Signature of New Registered Agent, if changing

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 SEP -9 AM 10:06

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>MARTHA Yappel</u>	<u>9081 SW 51st</u> <u>Cooper City FL</u> <u>33328</u>	☐ Add ☒ Remove
<u>P</u>	<u>PATRICIA Anderson</u>	<u>9081 SW 51st</u> <u>Cooper City FL</u> <u>33328</u>	☒ Add ☐ Remove
<u> </u>	<u> </u>	<u> </u>	☐ Add ☐ Remove

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

[illegible]

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>S</u>	<u>Debbie Rubino</u>	<u>9091 SW 51st</u> <u>Cooper City</u> <u>FL 33328</u>	☐ Add ☒ Remove
<u>_____</u>	<u>_____</u>	<u>_____</u> <u>_____</u> <u>_____</u>	☐ Add ☐ Remove
<u>_____</u>	<u>_____</u>	<u>_____</u> <u>_____</u> <u>_____</u>	☐ Add ☐ Remove

(attach additional sheets, if necessary). (Be specific)

[illegible]

(Attach additional sheets, if necessary)

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

The date of each amendment(s) adoption: 8/3/11

(date of adoption is required)

Effective date if applicable: 8/3/11

(no more than 90 days after amendment file date)

Adoption 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 9/1/11

Signature

Patricia A Anderson

(By the chairman 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)

PATRICIA A ANDERSON

(Typed or printed name of person signing)

President

(Title of person signing)