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TO:	Amendment Section Division of Corporations	▼ .	
SUBJ	ECT: American Legion Auxiliary Inc		
ivame	of Corporation		
DOC	UMENT NUMBER: N12000000847		
The er	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.	
Please	return all correspondence concerning this	s matter to the following:	
Pamela	a Pannasch		
Name	of Contact Person		
Ameri	can Legion Auxiliary		
Firm/0	Company		
898 E	James Lee Blvd		
Addre	ss		
Crestv	iew, FL 32539		
City/S	tate and Zip Code		
	alauxiliaryunit75@gmail.com	1	
E-mail address: (to be used for future annual report notification)			
		•	
For fu	rther information concerning this matter, p	please call:	
Pamela	a K Pannasch	at (850)305-1713 Area Code & Daytime Telephone Number	
	Name of Contact Person	Area Code & Daytime Telephone Number	
Enclos	sed is a \$35.00 check made payable to the	Department of State.	
	Mailing Address: Amendment Section	Street Address:	
		Amendment Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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