

N12 000 000 847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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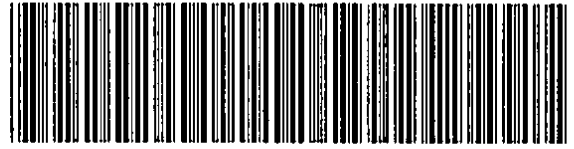
(Business Entity Name)

(Document Number)

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20 SEP 21 AM 11:12  
FILE  
LOCATION

Amend

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** American Legion Auxiliary, Inc.

**DOCUMENT NUMBER:** N12000000847

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

Please return all correspondence concerning this matter to the following:

Pamela Pannasch

(Name of Contact Person)

American Legion Auxiliary Inc.

(Firm/ Company)

898 E James Lee Blvd

(Address)

Crestview, FL 32539

(City/ State and Zip Code)

alauxiliaryunit75@gmail.com

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

For further information concerning this matter, please call:

Pamela Pannasch

850

305-1713

at

(Name of Contact Person)

(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

20 SEP 21 AM 11:12

RECEIVED  
DIVISION OF CORPORATIONS

Articles of Amendment  
to  
Articles of Incorporation  
of

American Legion Auxiliary, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

N12000000847

(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: Tracy Spencer-Medlock

New Registered Office Address:

(Florida street address)

(City)

Florida

(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.

X Tracy Spencer-Medlock

Signature of New Registered Agent, if changing

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>T</u>	<u>Tracy Spencer-Medlock</u>	<u>304 Sioux Circle</u> <u>Crestview, FL 32536</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Della Gliesche</u>	<u>5350 Shoffner Blvd</u> <u>Crestview, FL 32539</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Rhonda Hacker</u>	<u>408 Serene Court</u> <u>Crestview, FL 32539</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>S</u>	<u>Terrie Schrig</u>	<u>104 Aztec Ct</u> <u>Crestview, FL 32536</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Linda Osmon</u>	<u>898 E James Lee Blvd</u> <u>Crestview, FL 32539</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Aimee Snelgrove</u>	<u>3271 Pleasant Terrace</u> <u>Crestview, FL 32539</u>

F. If amending or adding additional Articles, enter change(s) here:

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

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- ☐ 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 9-8-2020

Signature Pamela K. Pannasch

(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)

Pamela K. Pannasch  
(Typed or printed name of person signing)

President  
(Title of person signing)