N12000000847

(Re	questor's Name)	
(Ad	dress)	
,	,	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	☐ MAIL
	_	_
(Bu	siness Entity Nar	me)
(Do	cument Number)	<u> </u>
(= -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•
Certified Copies	_ Certificate:	s of Status
0	EU. OU	<u> </u>
Special Instructions to	Hilling Officer:	

Office Use Only



300371771173

08/19/21--01011--010 **35.08



A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

American Legion NAME OF CORPORATION:	Auxilliary Inc
N12000000847 DOCUMENT NUMBER:	
,	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Krystal Wilber	
	(Name of Contact Person)
American Legion Auxilliary 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 u	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
Pamela Pannasch	850 305-1713
(Name of Contact Pers	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee & Certificate of Statu	© \$43.75 Filing Fee © S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation υſ

	of	
American Legion Auxilliary, Inc.		2021 AUG 19 AM 7: 5
Name of Corporation as currently filed with the	ne Florida Dept. of State)	
N12000000847		TOPET VIEW OF STEE
(Docu	ment Number of Corporation (if kno-	wn) = ==================================
ursuant to the provisions of section 617,1006, Fl mendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida Not For I</i>	Profit Corporation adopts the following
. If amending name, enter the new name of the	ne corporation:	
American Legion Auxiliary, Inc.		The new
ame must be distinguishable and contain the wor Company" or "Co." may not be used in the nan		or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or reg	n/a 	nter the name of the
new registered agent and/or the new registe	Krystal Wilber	
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
	898 E James Lee Blvd	
New Registered Office Address	,	da street address)
	Crestview	. Florida 32539
	(City)	(Zip Code)
iew Registered Agent's Signature, if changing hereby accept the appointment as registered age		e obligations of the position.
	Kuptol will	
	Signature of New Registere	rd 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: XChange X Remove X Add		<u>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change * Add	<u>v</u>	Yvette Moore	222 Blalock Crestview, FL 32539
Remove 2) Change Add	V	Della Gliesche	5350 Shoffner Blvd Crestview, FL 32539
Remove 3) Change Add × Remove	<u>T</u>	Traci Spencer-Medlock	304 Sioux Circle Crestview, FL 32536
4) Change Add	<u>T</u>	Krystal Wilber	5236 Moore Loop Crestview, FL 32536
Remove 5) Change	S	Terri Schrig	104 Aztec Ct
Add × Remove			Crestview, FL 32536
6) Change Add	<u>S</u>	Pat Roberts	7697 Four Flags Road Laurel Hill, FL 325687
E. If amending or add (attach additional sho		rticles, enter change(s) here: . (Be specific)	
		n/a	

		·			
					
					
	.,				
	 				
				 	
					
·					<u>. </u>
·			•		
	,4,				
		-			
The date of each amendment(s) a	doption:n/a	1			_, if other than the
date this document was signed.	- to				
Effective date if applicable:	n/a	an 90 days after am	andmont file data)		
Note: If the date inserted in this ble document's effective date on the De	ock does not meet t	the applicable statut		nts, this date will not b	oe listed as the
Adoption of Amendment(s)	(CHECK	ONE)			
The amendment(s) was/were a					
The amendment(s) was/were a was/were sufficient for approv	dopted by the men al.	neers and the number	er of votes east for th	e amendment(s)	

<i>:</i> .	
	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
	Signature Parela K. Parrasch
	(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)