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Amend/Name
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SEP 07 2018

1 ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations 7

NAME OF CORPORATION: EDWARD C. DESAUSSURE POST NO.9 THE AMERICAN LEGION JACKSONVILLE FL INC

DOCUMENT NUMBER: N12000001902

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

Please return all correspondence concerning this matter to the following:

STEPHANIE TRAYLOR

(Name of Contact Person)

EDWARD C. DESAUSSURE POST NO.9 THE AMERICAN LEGION JACKSONVILLE , FL INC

(Firm/ Company)

6242 OLD SOUTEL CT

(Address)

JACKSONVILLE FL 32219

(City/ State and Zip Code)

STEP_TRAY@YAHOO.COM

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

For further information concerning this matter, please call:

STEPHANIE TRAYLOR

904 5466154
at

(Area Code) (Daytime Telephone Number)

(Name of Contact Person)

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

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

✓ # 3011 7/25
3508

August 3, 2018

STEPHANIE TRAYLOR
AMERICAN LEGION POST 9
6242 OLD SOUTEL CT
JACKSONVILLE, FL 32219

SUBJECT: EDWARD C. DESAUSSURE POST NO. 9 THE AMERICAN LEGION
JACKSONVILLE, FLORIDA, INC.
Ref. Number: N12000001902

We have received your document for EDWARD C. DESAUSSURE POST NO. 9 THE AMERICAN LEGION JACKSONVILLE, FLORIDA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Documents reinstating the above listed entity were previously filed with this office. Please see the attached computer printout.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 918A00015986

RECEIVED
18 SEP - 7 AM 9:15
Division of Corporations

Articles of Amendment
to
Articles of Incorporation
of

EDWARD C. DESAUSSURE POST NO.9 THE AMERICAN LEGION JACKSONVILLE, Florida, INC.

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

N12000001902

(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:

KELLY J. MIXON AMERICAN LEGION POST 9 JACKSONVILLE FL. INC

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)

6242 OLD SOUTEL CT

JACKSONVILLE FL 32219

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6242 OLD SOUTEL CT

JACKSONVILLE FL 32219

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:

New Registered Office Address:

(Florida street address)

_____, Florida
(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.

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 checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Commander</u>	<u>LENA HEREDIA-PEREZ</u>	<u>9811 GARDEN ST</u> <u>JACKSONVILLE FL 32219</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Commander</u>	<u>MILTON TUCKER</u>	<u>85329 RADIO AVE</u> <u>YULEE FL 32181</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CFO</u>	<u>STEPHANIE TRAYLOR</u>	<u>7136 BUCKINGHAMSHIRE PL</u> <u>JACKSONVILLE FL 32219</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CFO</u>	<u>RANDY KEENER</u>	<u>1927 RALEY CREEK DR E</u> <u>JACKSONVILLE FL 32225</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u>

[illegible]

The date of each amendment(s) adoption: _____, if other than the date this document was signed.


Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 9/5/2018 _____

Signature  _____
(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)

STEPHANIE TRAYLOR

(Typed or printed name of person signing)

CHIEF FINANCIAL OFFICER

(Title of person signing)