N13000002886

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
· · · · · · · · · · · · · · · · · · ·
(Document Number)
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I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION:	rican Legion Auxillary NOVE
DOCUMENT NUMBER: N13000002886	<i>f</i>
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this is	
American Leg	(Name of Contact Person)
	e Park Blyd #7
Venice FL 3	(Address)
/v/v 7591@)36c E-mail address: (to by	
Sherry Butting to	case call: 2
/ (Name of £ontact Pe	erson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	le payable to the Florida Department of State:
\$35 Filing Fee	te & S43.75 Filing Fee & S52.50 Filing Fee tus Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certified 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 Al	nenament
10	
Articles of Inc	orporation
American Lepin auxil	aug NOVEL Unit 159 1
(Name of Corporation as currently file	with the Florida Dept. of State)
N1300002880	6
(Document Number of Co	orporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statutes, this amendment(s) to its Articles of Incorporation:	Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
	<i>Th.</i>
name must be distinguishable and contain the word "corporation" or	The new r "incorporated" or the abbreviation "Corp " or "lnc "
"Company" or "Co." may not be used in the name.	incorporated in the disactivation Corp. in the.
	70
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5.
(Studing undress MAT BE AT OST OFFICE BOX)	P1112: 15
	
). If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address	<u>:</u>
Name of New Registered Agent:	
Name of New Negasterea Agent.	
	Clarita and the
New Registered Office Address:	(Florida street address)

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

(Zip Code)

(City)

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: X Change X Remove X Add	$\overline{\underline{V}} = \overline{\underline{Mik}}$	<u>n Doc</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>P</u>	Marlene Hammon	North Port FL
Remove	. /	A1. 11. ii	34287
2) Change Add	<u>_V</u>	Kobin HIII	341 Shamrock Blow Vence FL
Remove 3) Change	I	Same	<u>34293</u>
Add Remove			
4) Change Add		5ame	
Remove	2	Donna Ley	120 Labella Ct
Add Remove	,		34292
6) Change Add	<u>V</u>	Marie Brugnola	504 Mount Vernon L Venice FL
Remove			34293

The date of each amendment(s) addate this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were as was/were sufficient for approve	dopted by the members and the number of votes cast for the amendral.	nent(s)
☐ There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/ors.	vere
Dated	2-17-19	
Signature	Theres Duffine	
have not be	rman or vice ghairman of the board, prosident or other officer-if dire en selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	
	Sherry Buffington (Typed or printed plame of person signing)	
	(Typed or printed fame of person signing)	
	reasurer	
	(Title of person signing)	