N13000008684

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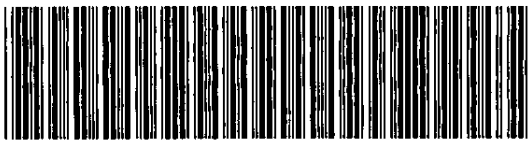

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DIVISION OF CORPORATIONS
15 NOV -2 AM 10:53

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C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: American Legion Auxiliary Aaron Vaughn Unit 399 Palm City, Inc.

DOCUMENT NUMBER: N13000008684

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

Please return all correspondence concerning this matter to the following:

Jo Ann Maitland

(Name of Contact Person)

American Legion Auxiliary Unit 399

(Firm/ Company)

1115 SE Alamanda Lane

(Address)

Stuart, FL 34996

(City/ State and Zip Code)

mait1st@aol.com

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

For further information concerning this matter, please call:

Jo Ann Maitland at 772 215-1330

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 NOV -2 AM 10:53

American Legion Auxiliary Aaron Vaughn Unit 399 Palm City, Inc.

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

American Legion Auxiliary Aaron Vaughn Unit 399 Palm City, Inc. N13000008684

(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)

1115 SE Alamanda Lane
Stuart, FL 34996

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

no change to mailing address

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: _____

_____
(Florida street address)

New Registered Office 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:

X Change	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ____ Change	T	Mysty Houchin	1328 SW Squire Johns Lane
____ Add			Palm City, FL 34990
X ____ Remove			
2) ____ Change	T	Jo Ann Maitland	1115 SE Alamanda Lane
X ____ Add			Stuart, FL 34996
____ Remove			
3) ____ Change	S	Dorinda Houchin	107 SW Hawthorne Circle
____ Add			Port St. Lucie, FL 34953
X ____ Remove			
4) ____ Change	S	Betty Austin	2459 SW Bobalink Ct.
X ____ Add			Palm City, FL 34990
____ Remove			
5) ____ Change	V	Marilyn Anderson	1722 Waterfall Blvd
____ Add			Palm City, FL 34990
X ____ Remove			
6) ____ Change	V	Melanie Millette	124 SE Villas St
X ____ Add			Stuart, FL 34994
____ Remove			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 10/27/15, if other than the date this document was signed.

Effective date if applicable: 10/27/15

(no more than 90 days after amendment file date)

SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 NOV -2 AM 10:54

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 10/30/15

Signature Jo Ann Maitland

(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)

Jo Ann Maitland

(Typed or printed name of person signing)

President

(Title of person signing)