

n 17000004239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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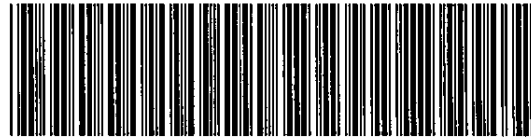
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. LEMIEUX
MAY 19 2017

Handwritten signature

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: American Legion Aux Unit 410 Inc.

Name of Corporation

DOCUMENT NUMBER: N17000004239

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Doris Miller

Name of Contact Person

Firm/Company

4005 Gatewood Street

Address

Cocoa, Florida 32926

City/State and Zip Code

birdie410alr@gmail.com

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

For further information concerning this matter, please call:

Doris Miller

Name of Contact Person

at **321 537-9191**

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: American Legion Aux Unit 410 Inc.
2. The principal office address: PO Box 560418 Rockledge, FL 32956
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/19/2017 Document number: N17000004239

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Theresa J. Barton

4032 Fountain Palm Rd

Cocoa, FL 32926

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Doris Miller

4005 Gatewood Street

P.O. Box NOT acceptable

Cocoa, FL 32926

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TALLAHASSEE, FLORIDA

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Doris Miller
Signature of an officer or director

Doris Miller
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Doris Miller
Signature of Registered Agent

5/11/2017
Date

If signing on behalf of an entity: