## N20202

(Requestor's Name)
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PICK-UP WAIT MAIL
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## COVER LETTER

TO: Amendment Section Division of Corporations						
Veterans of Foreign Wars, Bryan Tutten	Memorial Post 2391, Inc.					
Name of Corpo	ration					
DOCUMENT NUMBER: N20202						
The enclosed Statement of Change of Registered Office/Ag	gent and fee are submitted for filing.					
Please return all correspondence concerning this matter to	the following:					
Ernest Stanford						
Name of Contact	Person					
Firm/Company						
6184 US Highway 1	S					
Address	<del></del>					
St. Augustine, FL 3	2086					
City/State and Z						
Post2391@vfwfl.org						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Ernest Stanford	Area Code & Daytime Telephone Number					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department	nt of State.					
Mailing Address: Amendment Section	Street Address: Amendment Section					
Division of Corporations	Division of Corporations					
P.O. Box 6327	Clifton Building					
Tallahassee. FL 32314	2661 Executive Center Circle					
Tallahassee, FL 32301						

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

•	provisions of sections 607.0502, 61 unge is submitted for a corporation (				
	r to change its registered office or r				
1. The name of t	the corporation: Veterans of Fo	reign Wars,	Bryan Tutten M	Memorial Post 239	1, Inc.
2. The principal	office address: 6184 US High	way 1 S,	St. Augustine,	FL 32086	
3. The mailing a	address (if different):			<u>-</u> -	
4. Date of incorp	poration/qualification: 03/10/19	95 <sub>Do</sub>	cument number: N	120202	
	d street address of the current register rtment of State: (If resigned, enter re		registered office or	n file with the	
	Tinga, Edward Chester 2465 US Highway 1 S Unit 58				
	SAINT AUGUSTINE, FL 32086			2018 JAN	- <u>i</u> -i-
6. The name and (if changed):	d street address of the new registere	ed agent (if char	nged) and /or regist	ered office a	m
	Ernest Stanford				,
	377 Valverde Ln	<u> </u>	<del></del>	및 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등	- 
	St. Augustine, FL 32086	ox NOT acceptable		•	
The street address changed will	ess of its registered office and the s	street address o	of the business offi	ce of its registered age	nt,
Such change wa authorized by th	as authorized by resolution duly ad he board, or the corporation has be	dopted by its been notified in v	oard of directors or writing of the chan	by an officer so ge.	
mes Signatu	re of an officer of director	Ernes	st Stanford, Po	CD Commander	_
I further agree i performance of agent, Or, if the	the appointment as registered age to comply with the provisions of al my didies, and I am familiar with is document is being filed merely t that the corporation has been noti	ll statutes relat and accept the to reflect a cha	ive to the proper a obligation of my p nge in the register	nd complete position as registered	
Fat 1	1 0 O C	12/27	7/2017		_
-	enature of Registered Agent		Date		
T	yped or Printed Name				

\* \* \* FILING FEE: \$35.00 \* \* \*