

N20 00000 7751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000356477590

12/28/20--01026--025 **35.00

R. V. H. T. E.
FEB 0 6 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: G.R.E.A.T. RESCUE OF NE FLORIDA, INC.

DOCUMENT NUMBER: N02000007751

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

Please return all correspondence concerning this matter to the following:

REED BROWN
(Name of Contact Person)

GREAT RESCUE OF NE FLORIDA, INC.
(Firm/ Company)

PO BOX 600878
(Address)

ST. JOHNS, FL 32260
(City/ State and Zip Code)

GREATRESCUE@COMCAST.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

REED BROWN at 904-287-0712
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

G.R.E.A.T. RESCUE OF NE FLORIDA, INC.

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

N02000007751

(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:

N/A *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)

1140 LAKE PARKE DRIVE

ST. JOHNS, FL 32259

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

N/A

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: TERRI COOPER

1140 LAKE PARKE DRIVE

(Florida street address)

New Registered Office Address:

ST. JOHNS, FL

Florida 32259

(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>P</u>	<u>TERRI COOPER</u>	<u>1140 LAKE PARKE DRIVE</u> <u>ST. JOHNS, FL 32259</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>JUDITH BROWN</u>	<u>2424 HAWKCREST DRIVE E.</u> <u>JACKSONVILLE, FL 32259</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>REED BROWN</u>	<u>2424 HAWKCREST DRIVE</u> <u>JACKSONVILLE, FL 32259</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>PAULA GRADWELL</u>	<u>3716 BERENSTAIN DRIVE</u> <u>ST. AUGUSTINE, FL 32092</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>KATHI BELL</u>	<u>4735 WAVERLY LANE</u> <u>JACKSONVILLE, FL 32210</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>2NDV</u>	<u>PEYTON TAYLOR</u>	<u>6016 SALAMONICA DRIVE</u> <u>JACKSONVILLE, FL 32217</u>

F. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

<u>REMOVE</u>	<u>D</u>	<u>TINA MONFILETTO</u>	<u>13306 QUEEN MIST DRIVE</u> <u>JACKSONVILLE, FL 32258</u>
<u>ADD</u>	<u>D</u>	<u>BILL GRADWELL</u>	<u>3716 BERENSTAIN DRIVE</u> <u>ST AUGUSTINE, FL 32092</u>

- 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 DECEMBER 23, 2020

Signature *Judith Brown*
(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)

JUDITH BROWN
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)