

N0900000770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

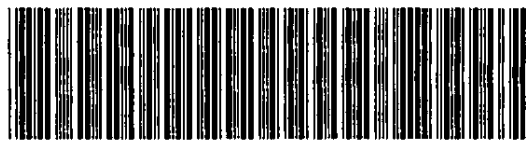
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
12 DEC 12 AM 9:45

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10/13/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Help From The Sanctuary, Inc.
Name of Corporation

DOCUMENT NUMBER: ND9000007770

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:

Arbutas Dawson Williamson
Name of Contact Person

Help From The Sanctuary, Inc.
Firm/Company

2600 Nez Perce Trail
Address

Tallahassee, FL 32303
City/State and Zip Code

arbutasdawson@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Arbutas Williamson at (850) 284-7539
Name of Contact Person 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: Help From The Sanctuary, Inc.
2. The principal office address: 2600 Nez Perce Trail Tallahassee FL 32303
3. The mailing address (if different): - same as above -

4. Date of incorporation/qualification: 8/10/2009 Document number: N0900000 7770

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)

Andrew R. Tintle
4347 Carnwath Rd.
Tallahassee, FL 32303

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

Arbutas Dawson Williamson
2600 Nez Perce Trail
P.O. Box NOT acceptable
Tallahassee, FL 32303

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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.

Arbutas Dawson Williamson Arbutas Dawson Williamson
Signature of an officer or director 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.

Arbutas Dawson Williamson 12/11/12
Signature of Registered Agent Date

If signing on behalf of an entity:

Typed or Printed Name

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