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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	ON: FRIENDS OF BRE	EUMRD COUNTY	FL. No.	TH ANIMAL CARE	<u>*</u> '
	ADOPTION CE	WIETE, INC.			
DOCUMENT NUMBER:					
The enclosed Articles of Am	nendment and fee are submi	itted for filing.			
Please return all corresponde	ence concerning this matter	to the following:			
WALTER	E J. KOHLER	70			
	C J. KOHLER	Name of Contact Perso	on)		
		(Firm/ Company)		· · · · · · · · · · · · · · · · · · ·	
	_				
8920 FRE	EDOM RD.				
		(Address)			
Mims Fu	32754				
	(1	City/ State and Zip Cod	de)		
00.		0 0 .			
CRITTE	R SLAUE @ 9m -mail address: (to be used I	or future annual report	notification)	
For further information cond					
•					
WALTER	KOHLER	at	321	863-0440 (Daytime Telephone Numl	
	(Name of Contact Person)	(A	rea Code)	(Daytime Telephone Num	oer)
Enclosed is a check for the f	'ollowing amount made pay	able to the Florida Dep	partment of	state:	
☐ \$35 Filing Fee	\$43.75 Filing Fee & C Certificate of Status		Certifi Certifi	Filing Fee cate of Status ed Copy is sed)	
Mailing A			t Address		
	nt Section		dment Secti		
Division o P.O. Box	of Corporations		ion of Corpo n Building	rations	
	ee, FL 32314			enter Circle	

JUL 18 2016 I ALBRITTON

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

FRIENDS OF BREUARD CBUNTY F	LU NORTH ANIMA	CARE + ADOPTION CE	NTER, IN
	currently filed with the	Florida Dept. of State)	•
N 1200000933		(;f1)	
(Досштеп	t Number of Corporation	(II Known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida N</i> o	nt For Profit Corporation adopts the	e following
A. If amending name, enter the new name of the co	orporation:		
FREEDOM TAILS RESCU	E. TNC	· · · · · · · · · · · · · · · · · · ·	The new
name must be distinguishable and contain the word "o	corporation" or "incorpo	rated" or the abbreviation "Corp.	" or "Inc."
"Company" or "Co." may not be used in the name.	.1/2		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADL	ii		
		57.40	- 23
C. Enter new mailing address, if applicable:	11/2	A SEC	E TI
(Mailing address MAY BE A POST OFFICE BO	$\frac{N}{N}$	三	=
		in the	= 1
			宝一
		0:	1
D. If amending the registered agent and/or register new registered agent and/or the new registered		rida, enter the name of the	50
	11/4		
Name of New Registered Agent:	-14/7		
_		(Florida street address)	
New Registered Office Address:	NA	(1 to	
	/	. Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		ccept the obligations of the position	ì.
	Signature of New I	Registered Agent, if changing	

· 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 X Remove X Add	PT John D V Mike Je SV Sally S	ones	
Type of Action (Check One)	Title	Name /	Address
1) Change		N/A	· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
2) Change		N/A	
Ađd			
Remove		. 1	
3) Change		N/A	
Add		,	
Remove			
4) Change		NA	
Add		/	
Remove			
5) Change		N/A	
Add		,	
Remove			
δ) Change		N/A	
Add		. /	
Remove			

(attach additional sheets, if necessary). (Be specific)				
ARTICLE 1, CHANGE OF NAME, IS THE ONLY ARTICLE TO BE CHANGED. ALL OTHER ARTICLES REMAIN THE SAME				
ARTICLE tO BE CHANGED. ALL OTHER				
ARTIPLES REMAIN THE SAME				
· · · · · · · · · · · · · · · · · · ·				

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

date	e date of each amendment(s) adoption: The Ey 2, 2016 e this document was signed.	_, if other than the
Effe	ective date if applicable: TVLY 2, 2016 no more than 90 days after amendment file dates	
Not	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not burnent's effective date on the Department of State's records.	e listed as the
Ade	option of Amendment(s) (CHECK ONI-	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
Ø	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 July 2, 2016	
	Signature Welt J. Kohl TV	_
	(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)	
	WALTER J. KOHLER, TV (Typed or printed name of person signing)	
	(1 yped or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	