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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Barry Veterinary II	lospital, Inc.	
DOCUMENT NUM	\$51789		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Debbie Lee		
		Name of Contact Person	n
	Wyrough Law Firm P A		
		Firm/ Company	
	30 South Shore Drive		
		Address	
	Miramar Beach FL 32550		
		City/ State and Zip Cod	c
debh	ic-lee@embarqmail.com		
<del></del>		sed for future annual report	notification)
			•
For further informatic	on concerning this matter, pleas	se call:	
Debbie Lee		at (850	650-7797
Name of Contact Person		Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filling Fee	□S43.75 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		Street Address Amendment Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, Fl. 32301

## Articles of Amendment to Articles of Incorporation of



Barry Veterinary Hospital, Inc.		1.25
(Name of Corporation as currently	filed with the Florida Dept. of State)	1
851789	•	<b>Q</b> •
(Document Number of C	Torporation (if known)	10
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	lorida Profit Corporation adopts the following amendm	ient(s) to
A. If amending name, enter the new name of the corporation:		
Sandstone Enterprises, Inc.	The ne	11.
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviatio o". A professional corporation name must contain th	n
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent		
(Florida stree	4 address)	
New Registered Office Address:	, Florida	
	Tiy) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi		
Signature of New Re	gistered Agent, if changing	

1. (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 = Secketary; 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 Doc 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	<u>PT</u>	<u>John Doc</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 + Change	<del></del>		
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	icles, enter change (Be specific)			
	<u> </u>			
	******	<del></del>		
		•		
			<del> </del>	
f an amendment provides for an exch	<u>range, reclassificat</u> endment if not con-	ion, or cancellation	on of issued share: adment itself:	<u>s.</u>
- nrovisions for implementing the anie				
provisions for implementing the ame (if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)			,	
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: (no more-than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, t document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amenda by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following so must be separately provided for each voting group entitled to vote separately on the amendment(s,	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	eholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	der
August 31, 2017	
Signature Palmil 18 0 Ram	
(By a director, president or other officer (if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	
Patrick H.G. Barry	
(Typed or printed name of person signing)	<del> </del>
Cld	
(Title of person signing)	