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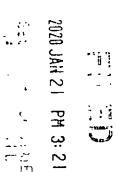
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COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPORATION: BARALTY FIDO CE	HARITABLE FOUR	NDATION, IN	NC.
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matter	r to the following:		
KATALINA PEÑARANDA, ESQ			
	(Name of Contact P	erson)	
GUTTENMACHER, BOHATCH & PEÑARANDA,	P.A.		
	(Firm/ Compan	y)	
7301 SW 57th COURT, SUITE 560			
	(Address)		
SOUTH MIAMI, FL 33143			
	(City/ State and Zip	Code)	
kpenaranda@gbptaxlaw.com			
E-mail address: (to be used	for future annual re	port notification	on)
For further information concerning this matter, please of	call:		
KATALINA PEÑARANDA, ESQ	at	305	666-1040
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	yable to the Florida	Department of	f State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & E Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certi is Certi (Ado	50 Filing Fee ificate of Status ified Copy litional Copy is losed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	At Di	reet Address mendment Sec vision of Corp ifton Building	porations

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

٥f

BARALTY FIDO CHARITABLE FOUNDATION, INC.

(Name of Corporation as curre	ently filed with the Florida Dept. of State)
1	N19000000096
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 617.1006. Florida Statuamendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	<u>ition:</u>
	The new
name must be distinguishable and contain the word "corpord" "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	2020
	. 22
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	* . ., ~ 0
(Muning dutiess MAT DE A LOGI OF LICE DON)	. ω
	[1]
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent:	
Nume of New Negistered Agent.	
	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J	ed Agent: 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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DIR	KATHRYN COURAIN	7301 SW 57TH COURT
Add			SUITE 560
X Remove			SOUTH MIAMI, FL 33143
2) Change	DIR	ENRICO DELGADO	7301 SW 57TH COURT
X Add			SUITE 560
Remove			SOUTH MIAMI, FL 33143
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

If amending or adding additional Art attach additional sheets, if necessary).	(be specyic)				
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			 -		
			 		
				<u>.</u>	

date this document was signed.	, if other than the
Effective date if applicable:	
(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, this date adocument's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment was/were sufficient for approval.	(s)
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 Doc Do 1019	
Signature Warsard M. DOL	
(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
MARGARET H. MILLER	
(Typed or printed name of person signing)	-
DIRECTOR	
(Title of person signing)	•