I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 04/14/2016

PRESIDENT

SIGNATURE: RICHARD COUTO

Electronic Signature of Signing Officer/Director Detail

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL **REPORT**

DOCUMENT# N1000000936

Entity Name: ANIMAL RECOVERY MISSION, INC.

Current Principal Place of Business:

927 LINCOLN RD MIAMI BEACH, FL 33139

Current Mailing Address:

PO BOX 403344 MIAMI BEACH, FL 33140 US

FEI Number: 30-0602348

Name and Address of Current Registered Agent:

COUTO, RICHARD 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

Apr 14, 2016 Secretary of State CC1720699360

FILED

Certificate of Status Desired: Yes

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	RICHARD COUTO			04/14/2016
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	D	Title	O, TREASURER	
Name	COUTO, RICHARD DIRECTO	Name	LOWNEY, KRIS OFFICER	
Address	927 LINCOLN RD	Address	PO BOX 403344	
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33140	
Title	VP	Title	CFO	
Name	CHRUPCALA, MAIA	Name	TAYLOR, RACHEL ANN	
Address	PO BOX 403344	Address	PO BOX 403344	
City-State-Zip:	MIAMI BEACH FL 33140	City-State-Zip:	MIAMI BEACH FL 33140	

Date