735098

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600309459546

02/28/18--01016--001 **70.00



JUN 1 4 2013



COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION Society for the Prevention of Cenerty
DOCUMENT NUMBER: 735698
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Joyce TALLEY (Name of Contact Person)
SPCA of HERNANCL COCENTY. (Firm/ Company)
9075 GRANT St
(Address)
City/ State and Zip Code)
(City/ State and Zip Code) LUNS helfee (Lol, Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jogce TALLEY at 352 - 596 - 1897 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

April 23, 2018

JOYCE TALLEY 9075 GRANT ST BROOKSVILLE, FL 34613

SUBJECT: SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS OF

HERNANDO COUNTY, INC.

Ref. Number: 735698

We have received your document for SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS OF HERNANDO COUNTY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If you are changing the president you need to do a amendment to your articles.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 218A00008197

Articles of Amendment

FILED

Articles of Incorporation

Som	ict.	A A	ot .	SAP		JUN J	3 B/E
<u>×3000</u>	cry to	R FLE TO Name of Corporation	evento		<u> </u>	LECTY 1	Wascine
4.	√ ' I	Name of Corporation	1 as currently filed v	vitn the Frori	da Dept. o	THE PROPERTY.	SEE PLOK
	13569	28					
		(Docu	ment Number of Corp	oration (if kn	own)		
	o the provisions of nt(s) to its Articles	section 617.1006, Floor of Incorporation:	orida Statutes, this Flo	orida Not For	Profit Cor	poration adopts	the following
A. <u>If ame</u>	ending name, ente	er the new name of th	e corporation:				
							The new
		e and contain the wor		incorporated	" or the abl	reviation "Corp	or "Inc."
<u>"Compan</u>	y" or "Co." may i	oot be used in the nan	<u>ur</u> .				
B. Enter	new principal off	ice address, if applica	able:				
(Principal	office address <u>M</u>	UST BE A STREET A	ADDRESS)			-	
						·	
							<u> </u>
C Entor	nau mailina add	ress, if applicable:					
		BE A POST OFFICE	BOX)				
					··········		<u> </u>
D Ifamo	ending the registe	red agent and/or regi	stored office address	s in Elorida <i>e</i>	nator the n	amo of the	
		nd/or the new register			-	_	
	Magaz of A	lew Registered Agent:	Rosal	10 4	Seni	eete	
	Name or N	ew Registered Agent.	1 10 000 0	<u>, C</u>			
				(6)			
	New Rea	istered Office Address		(+10	rida street adi	aress)	
			(City)			, Florida <u> </u>	
			(City)			(zip code)	
		gnature, if changing				. <i>tu</i> l . 63	
i nereby a	ccept the appointn	nent as registered ager	ητ. I am tamiliar witt	n and accept t	ne obligatio	ons of the positio	n.
			R	. 0	/	_	
		-	1105al	Now Day	The same	il changing	
			signature o	ı inew kegiste	rea Agent,	ıı 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	PT John Doe Y Mike Jones SV Sally Smith	
Type of Action (Check One)	Title Name	Address 13452 Twipberge
1) Change	President MARIA Buckle	Spring Heir flag
Add		To me (Epros)
Remove	PROSALIE BENNELL	The sales
2) Change	PAUROSALIE DENNEED	1504 Copelaus WAG
Add		Scooks Ville, Fla
Remove	ρ	34604
3) Change	PRESIDENT MARGE NEWMAN	
Add	HAS MOVED to West	Unkrowi to
Remove	Virginia. It is not Clear to me if MRS	Me Joyce Sacrey
4) Change	pewmen or mrs. pewmen or mrs. pewhere to currently clisted as pleased and or funding	
Add	clisted as present	
Remove	on Jung33	·
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

If amending or adding additional Argatach additional sheets, if necessary).	(Be specific)				
			······································		
•					
			 –		
		· · ·			
······································		_,			
					
				· · ·	
			· · · · · · · · · · · · · · · · · · ·		
			····		
		· · · · · · · · · · · · · · · · · · ·			
		··			
		~·····			
					·····
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
		 -			
			<u>.</u>		
					······································

The date of each amendment(s) adop	tion:	, if other than the
late this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block locument's effective date on the Depar	does not meet the applicable statutory filing requirements, this date wi tment of State's records.	II not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/were	
Dated 6/9/	18 Jalley	
Signature 40 9,0	e Lalleg	
have not been s	n or vice chairman of the board, president or other officer-if directors selected, by an incorporator — if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	
Jo	(Typed or printed name of person signing)	
	•	
<u></u>	REASURER ON BOARD OF DI (Title of person signing)	pecdols
	(Title of person signing)	