## 744671

Office Use Only



500288465875

08/01/16~-01008--020 \*\*52.50

2016 AUG - 1 PM 3: 31

AUG 8 2016

**C** LEWIS

## **COVER LETTER**

•		•	,	
NAME OF CORPORATION:	ADE	County	Vetcemany	Foundation; inc
		671	•	
DOCUMENT NUMBER:	, ,			
The enclosed Articles of Amendment and	l fee are subm	nitted for filing.		
Please return all correspondence concerni	ng this matter	to the following:		
Lanny	RERI	Name of Contact Person	MN	•
				,
South F	(orusa	. Veterina	ny Founda	HON
		(Firm/ Company)	•	
751 NE 11	68 5			
NORTH MIAN	ni le	(Address)	L 33162	
Office 1	SFV.	•		
For further information concerning this m	atter, please o	all:		
Dr. Lanny BEnus	TEIN	at	305 652-5	
) (Name of Co	ntact Person)	(Are	ea Code) (Daytime Telephone l	Number)
Enclosed is a check for the following amo	unt made pay	able to the Florida Depar	rtment of State:	
<del>-</del>	iling Fee & [ te 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		Street A		
Amendment Section Division of Corporation	ie		nent Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

**Division of Corporations** 

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

## **Articles of Amendment** Articles of Incorporation

2016 AUG - 1 PM 3: 31

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: MIAMI VETERINARY FOUND ATION, INC.

The new name must be distinguishable and contain the world "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name, B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida . (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

٤,

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 <math>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 J           SV         Sally S	ones / / /	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<del></del>		
Remove			
2) Change Add			
Remove 3) Change			
Add			
4) Change			
Add			
5) Change			
Add			
6) Change			
Add			

E. If amending or adding additional Articles, enter change(s) here:  (attach additional sheets, if necessary). (He specific)					
	/				
				· · · · ·	
				·	
		<del></del>			
		<del></del>	· · · · · ·		-
				.=	

The date of each amendment(s) a date this document was signed.	doption: 5-11-16 BOARD VOLC. NAME Chargest other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(s)
There are no members or mem adopted by the board of direct	obers entitled to vote on the amendment(s). The amendment(s) was/were tors.
Dated	7-28-16
have not be	rman or vice chairman of the board, president or other officer-if directors een selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
	SERUSTEIN (Typed or printed name of person signing)
	TROUS URER (Title of person signing)

2