

754178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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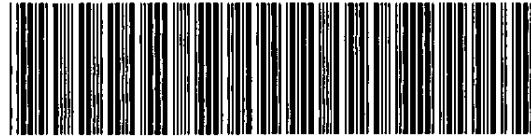
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: **Flagler Humane Society**

DOCUMENT NUMBER: **754178**

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Diane Voigt**

(Name of Contact Person)

**Flagler Humane Society**

(Firm/ Company)

**1 Shelter Drive**

(Address)

**Palm Coast, FL 32137**

(City/ State and Zip Code)

**dvoigt@flaglerhumanesociety.org**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Diane Voigt**

(Name of Contact Person)

at **386 445-1814**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

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

**Street Address**

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

Articles of Amendment  
to  
Articles of Incorporation  
of

Flagler Humane Society, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

754178

(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:**

*The new name must be distinguishable and contain the word "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:

Diane Voigt

1 Shelter Drive

(Florida street address)

New Registered Office Address:

Palm Coast

(City)

Florida 32137

(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.*

\_\_\_\_\_  
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                      PT      John Doe  
X Remove                      V      Mike Jones  
X Add                              SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>      </u> Change <u>      </u> Add <u>x</u> <u>      </u> Remove	<u>P</u>	<u>Susan Kamberalis</u>	<u>5 Claymont Ct. S</u> <u>Palm Coast, FL 32137</u>
2) <u>      </u> Change <u>x</u> <u>      </u> Add <u>      </u> Remove	<u>P</u>	<u>Diane Voigt</u>	<u>906 Woodstream Lane</u> <u>Ormond Beach, FL 32174</u>
3) <u>      </u> Change <u>      </u> Add <u>x</u> <u>      </u> Remove	<u>VP</u>	<u>Robert Tate</u>	<u>5690 John Anderson</u> <u>Flagler Beach, FL 32136</u>
4) <u>      </u> Change <u>      </u> Add <u>x</u> <u>      </u> Remove	<u>T</u>	<u>Thomas McKean</u>	<u>22 Blue Oak Lane</u> <u>Palm Coast, FL 32137</u>
5) <u>      </u> Change <u>x</u> <u>      </u> Add <u>      </u> Remove	<u>T</u>	<u>William Smith</u>	<u>275 Parkview Dr.</u> <u>Palm Coast, FL 32137</u>
6) <u>      </u> Change <u>      </u> Add <u>x</u> <u>      </u> Remove	<u>S</u>	<u>Christina Franzen</u>	<u>1472 Elkcam Blvd.</u> <u>Deltona, FL 32725</u>

**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.*

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Example:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action  
(Check One)

Title

Name

Address

7. <u>h</u> <u>Change</u> <u>x</u> <u>Add</u> <u>Remove</u>	<u>S</u>	<u>Nicole Brose</u>	<u>27 N. Waterview Drive</u> <u>Palm Coast, FL 32137</u>
2) <u>Change</u> <u>X</u> <u>Add</u> <u>Remove</u>	<u>VP</u>	<u>ELIZABETH ROBINSON</u>	<u>18 Mahoe Dr. N</u> <u>PALM COAST, FL</u> <u>32137</u>
3) <u>Change</u> <u>Add</u> <u>Remove</u>			
4) <u>Change</u> <u>Add</u> <u>Remove</u>			
5) <u>Change</u> <u>Add</u> <u>Remove</u>			
6) <u>Change</u> <u>Add</u> <u>Remove</u>			

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

**N/A**

The date of each amendment(s) adoption: \_\_\_\_\_

7/5/12

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ 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

July 5, 2012

Signature

Diane Voigt

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Diane Voigt

(Typed or printed name of person signing)

President, Board of Directors

(Title of person signing)