## 763275

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06/21/3

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Humane S	Society/SPCA	of Sumter Co Inc
DOCUMENT NUMBER: 763275		
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Mary Chiles		
	(Name of Contact Person	)
Humane Society/SPCA	of Sumter C	o Inc
	(Firm/ Company)	
Box 67		
	(Address)	
Lake Panasoffkee, Fl 33	538	
	(City/ State and Zip Code	2)
info@hsspca.org  E-mail address: (to be used	for future annual report n	otification)
For further information concerning this matter, please	call:	
Mary Chiles	<sub>at (</sub> 352	7939117
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## HUMANE SOCIETY/SPCA OF SUMTER COUNTY, INC.

(Name of Corporation as currently filed with the Florida De	ept. of State)
763275	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this amendment(s) to its Articles of Incorporation:	Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" or "Company" or "Co." may not be used in the name.	"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> )	
<del></del>	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	mo 3
,	Tro y
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent:	
· ·	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 w	
nereby accept the appointment as registered agent. I am jumitar n	in and accept the congunots of the position.
Signature of New Registered A	zent, if changing

Page 1 of 4

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; CEQ = 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 Do Mike Jo Sally Sn	nes	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
l) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		<del>-</del>		
Add				
Remove				
5) Change		<u></u>		
Add				
Remove				
6) Change				
Add		_		
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
Article Purpose					
Encourage responsible animal practices through education,					
2. Pursue reported incidents of animal cruelty and/or neglect and take appropriate action,					
3. Provide care for adoptable animals that are injured, abused, unwanted or abandoned whenever possible,					
4. Spay and neuter animals, as appropriate, to be adopted to reduce unwanted animal populations.					

The date of each amendment(s) adoption: 10/25/12					
Effective date if applicable: 01/01/13					
3	<u> </u>	(no more than 90 days after amendment file date)			
Ado	option of Amendment(s)	(CHECK ONE)			
	The amendment(s) was/w was/were sufficient for ap	rere adopted by the members and the number of votes cast for the amendment(s) oproval.			
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.			
	Dated 6/1	0/13			
	Signature	May Chiles			
	(By the	chairman of vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)			
	Mary C	hiles			
		(Typed or printed name of person signing)			
	Secreta	ary, Board of Directors			
	<del></del>	(Title of person signing)			