KU1977

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	(Address)	
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PICK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
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Amendicus Mundicus Mundicus

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Bayshore Animal Clinic of Tampa, Inc. DOCUMENT NUMBER: K61977 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Leigh Kellett Fletcher Name of Contact Person Kellerhals Ferguson Fletcher Kroblin PLLC Firm/ Company 501 East Kennedy Boulevard, Suite 802 Address Tampa, Florida 33602 City/ State and Zip Code dogtor@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Meegan Panzarella Name of Contact Person 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 Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

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

is enclosed)

Articles of Amendment to Articles of Incorporation of



Bayshore Animal Clinic of Tampa, Inc.

(Name of Corporation as	currently filed with the Flo	rida Dept. of State)		
K61977				
(Documer	nt Number of Corporation (if l	known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>FI</i>	orida Profit Corporation a	dopts the following	amendment(s) to
A. If amending name, enter the new na	me of the corporation:			
			7	The new
name must be distinguishable and con. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc." or "Co	o". A professional corpor		
B. Enter new principal office address,				
(Principal office address MUST BE A S	TREET ADDRESS)			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)				
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>, , , , , , , , , , , , , , , , , , , </u>			
D. If amending the registered agent an		ss in Florida, enter the na	me of the	
new registered agent and/or the nev		tohor		
Name of New Registered Agent	Leigh Kellett Fle		_	
	501 East Kennedy B	·	<u>.</u>	
	(Florida stree	-	2220	
New Registered Office Address:	Tampa	, Florida	33602	
	(City)		(Zip Code)	
New Registered Agent's Signature, if c				
I hereby accept the appointment as regist	ered agent. I am familiar wi	th and accept the obligation	ns of the position.	
	andrure of New Registered Ac	cont 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)

Example:

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.

<u>X</u>	Cha	nge	PT	<u>John</u>	<u>Doe</u>	
X	Rem	iove	<u>v</u>	Mike	Jones	
<u>x</u>	Ado	i	<u>sv</u>	<u>Sally</u>	Smith	
		Action One)	<u>Title</u>		Name	<u>Addres</u> s
		Change	PSI	2	Stuart Ray Rosenberg	2812 West Gandy Boulevard
_		_ Add			•	Tampa, Florida 33611
-	X	_ Remove				
2)		_ Change	PSI)	Jacob Drewes	2812 West Gandy Boulevard
		_ Add				Tampa, Florida 33611
_		_ Remove				
3)		_ Change	VPTI	D	Meegan Panzarella	2812 West Gandy Boulevard
_	X	_ Add				Tampa, Florida 33611
-		_ Remove				
4)		_ Change		_		
-		_ Add				
		_ Remove				
5)		_ Change		_		
		_ Add				
		_ Remove				
6)		Change				
		_ Add				
		Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<u> </u>	
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
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provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	

Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date) (CHECK ONE)
	(CHECK ONE)
A 34' 6 A 3 44->	
Adoption of Amendment(s)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
	oved by the shareholders through voting groups. The following statemen ach voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder
Dated	8-28-13
Signature (Pug die	ector, president or other officer - if directors or officers have not been
selected,	by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
_	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
-	(Title of person signing)