N04000005939

(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

400058765824

08/22/05--01058--018 **35.00

FILED
05 AUG 22 PM 3:25
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Smith AUG 24 2005

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Second Chance Cat Rescue

DOCUMENT NUMBER: N04000005939

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

Please return all correspondence concerning this matter to the following:

Mari Molina
(Name of Contact Person)

Second Chance Cat Rescue
(Firm/ Company)

P.O. Box 224
(Address)

Flagler Beach, Fl. 32136
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Mari Molina at (386) 503-4250
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ $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

Street Address
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

Second Chance Cat Rescue, Inc.
(Name of corporation as currently filed with the Florida Dept. of State)

N04000005939
(Document number of corporation (if known))

FILED
05 AUG 22 PM 3:25
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

Name: Pagliaro, Marilyn Title: Secretary
Home Address: 625 Waseta Ct.
City, State, and Zip: Winter Springs, FL. 32708

Name: Crew, Sara Title: Treasurer
Home Address: 212 S. 8th St
City, State and Zip: Flagler Beach, Fl 32136

Name: Molina, Mari Title: President
Home Address: 16 Windward Dr.
Flagler Beach, FL. 32136

(Attach additional pages if necessary)
(continued)

The date of adoption of the amendment(s) was: JUNE 30, 2005

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 was sufficient for approval.

☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 18 day of July, 2005.

Signature _____
(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.)

Mari Molina
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE: $35