

NO5000000422

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(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 OCT -9 PM 2:53

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Amend.  
10/21/08  
DC

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Bay Area Recovery K-9s of Florida, Inc.

**DOCUMENT NUMBER:** NO5000000422

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

Please return all correspondence concerning this matter to the following:

Melissa Ellis

(Name of Contact Person)

Bay Area Recovery K-9s of Florida, Inc.

(Firm/ Company)

205 Jack Ave North

(Address)

Lehigh, Acres, Florida 33971

(City/ State and Zip Code)

For further information concerning this matter, please call:

Melissa Ellis

(Name of Contact Person)

at ( 239 ) 770-3389

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <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<br>is 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**

Bay Area Recovery K-9s of Florida, Inc.

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

N05000000422

(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:

**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)**

**\*\*\*\*\*Change in Board of Directors / Officers as follows:\*\*\*\*\***

Sylvia Brlecic 510 County Road 328, Piedmont, AL 36272 (Director/President)

Melissa Ellis 205 Jack Ave North, Lehigh Acres, FL 33971 (Director/ V President)

Loralei Nistal 9330 N. Ashley St., Tampa, FL 33612 ( Director/T/S/)

**\*\*\*\*\*Delete the following Directors/Officers\*\*\*\*\***

Andrew Prcival 3811 17th Ave SW, Naples, FL 34117 (T)

Susan Percival 3811 17th Ave SW, Naples, FL 34117 (S)

Susan Percival 3811 17yh Ave SW, Naples, FL 34117 (P/D)

**\*\*\*Change in the Principle Place of Business and Registered Agent\*\*\***

Attached is the statement of change of Registered Office or Registered Agent or Both for Corporations.

(Attach additional pages if necessary)  
(continued)

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08 OCT -9 PM 2:53  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

**Continued  
Articles of Amendment  
to  
Articles of Incorporation  
of**

**Bay Area Recovery K-9s of Florida, Inc.**  
(Name of Corporation as currently filed with the Florida Dept. of State)

N05000000422  
(Document number)

**AMENDMENTS ADOPTED (CONTINUED)**

**\*\*\*\*\*Change in Registered Office/Mailing Address\*\*\*\*\***

**Melissa Ellis (contact Person)**

**205 Jack Ave North**

**Lehigh Acres, Florida 33971**

**Day Phone 239-770-3389**

**\*\*\*\*\*Change in Registered Agent\*\*\*\*\***

**Melissa Ellis / Registered Agent**

**205 Jack Ave North**

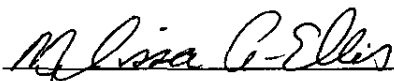
**Lehigh Acres, Florida 33971**

Such change was authorized by resolution duly adopted by its board of directors.



Sylvia Brlecic/ Director

I here by accept the appointment as registered agent and agree to act in this capacity.



date 10/3/08

**\*\*\*\*\*Signed Statement of Change Attached\*\*\*\*\***

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Bay Area Recovery K-9s of Florida, Inc.
2. The principal office address: 205 Jack Ave North, Lehigh Acres, Florida 33971
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/12/2005 Document number: NO5000000422
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Andrew Percival

3811 17th Ave.SW

Naples, Florida 34117

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Melissa Ellis

205 Jack Ave North

(P.O. Box NOT acceptable)

Lehigh Acres, Florida 33971

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Sylvia Brlecic / Director  
(Signature of an officer or director)

Sylvia Brlecic / Director

(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Melissa A. Ellis  
(Signature of Registered Agent)

October 3, 2008  
(Date)

If signing on behalf of an entity:

MELISSA A. ELLIS  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

ATTACHMENT

The date of adoption of the amendment(s) was: October 3, 2008

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.

Signature Sylvia Brlecic Director/President  
(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.)

Sylvia Brlecic

(Typed or printed name of person signing)

Director/President

(Title of person signing)

**FILING FEE: \$35**