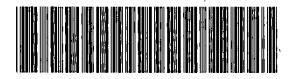
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SEURETARY OF STAIT

C. LEWIS

APR 2 4 2014

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Key West	Cat Soci	ety Inc.
DOCUMENT NUMBER: NO 600	00100	36
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matter	to the following.	
Theresa Foley		
	(Name of Contact Pe	rson)
Venice Cat Coalition		
	(Firm/ Company)
1131 Columbine Rd.		
	(Address)	
Venice FL 34293		
	(City/ State and Zip (Code)
info@venicecatco	alition.co	m
E-mail address: (to be used	for future annual rep	ort notification)
For further information concerning this matter, please	call:	
Theresa Foley	" _. 941	525 4568 a Code & Daytime Telephone Number)
(Name of Contact Person)	(Are	a Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida I	Department of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ап Div Cli	reet Address nendment Section vision of Corporations fton Building 51 Executive Center Circle

Tallahassee, FL 32301

APPKUVLU AND FILED

14 APR 17 AM 11:08

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Articles of Amendment to Articles of Incorporation

Key West Cat Society, Inc.	_
(Name of Corporation as currently filed with the Florida Dept. of State)	
N06000010036	
(Document Number of Corporation (if known)	
ursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the mendment(s) to its Articles of Incorporation:	ne followin
. If amending name, enter the new name of the corporation:	
/enice Cat Coalition, Inc.	77
ame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp. Company" or "Co." may not be used in the name.	The new " or "Inc."
s. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	
	
 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: 	
new registered agent and/or the new registered office address.	
Name of New Registered Agent:	
(Florida street address) New Registered Office Address:	
Ten regulered Office read end.	
(City), Florida (Zip Co	
(City) (Zip Co	ae)
lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	J.
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 <math>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 A Add	V Mike	Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Dir	Stacy Dolleman	Arcoclea FC
Add X Remove			
2) Change Add	Dir	Kathy Childers-McGee	2333 Bengal Ct. Punta Gorda FL
X Remove 3) Change Add X	Dir	Janet Gould	33983 249 Burrey Rd Pt. Charlotte FC 33952
X Remove 4) Change X Add	Dir	Kathi Dunn	1864 Whispering Pines Circle Englewood, FL
Remove 5) Change X Add	Dir	Julie Boss	8721 SW Otter Tr. Arcadia, FL 34266
Remove 6) Change Add	Dir	Terry Nichols	809 Seminole St Venue FL 34293
X Remove		P 2 -5 4	

ttach additional sheets, if necessary).	(Be specific)
	,
·	
	·



	date of each amendmen		14 APR 17 AM 11:08	, if other than the
	this document was signed ective date if applicable:	4/15/14	SECRETARY OF STATE FALLAHASSEE, FLORIDA	
		(no more than 90 days	after amendment file date)	
Ade	option of Amendment(s)	(CHECK ONE)		
	The amendment(s) was/w was/were sufficient for ap		e number of votes cast for the amendment(s)	
	There are no members or adopted by the board of o		nendment(s). The amendment(s) was/were	
	Dated 4/1	/14	·	
	Signature	Ineresa Dole	L	
	have r		pard, president or other officer-if directors r – if in the hands of a receiver, trustee, or luciary)	
	There	sa Foley		
		(Typed or printed name of pe	erson signing)	
	Direct	or, Exec. Director		
		(Title of person sig	mine)	