N0800008937

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SECRETARY OF STATE TALLAHASSEE: FLORIDA

Amendia

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Poodle	and Pooch Rescue	
DOCUMENT NUMBER:	N0800	000 8937	
The enclosed Articles of Amendm	ent and fee are si	ubmitted for filing.	
Please return all correspondence c	oncerning this ma	atter to the following:	
	Donna (Name o	G Ticknor of Contact Person)	
	Poodle (Fir	and Pooch Bescue	
	5513 F	Palm Lake (ir. (Address)	
	Orlando (City/S	TL 32819 tate and Zip Code)	<u>-</u>
		ticknor.com sed for future annual report notification	on)
For further information concerning	g this matter, plea	ise call:	
Donna G Tic	tnor	at (<u>407</u>) <u>810 35</u> (Area Code & Daytime	47
(Name of Contact P	erson)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the follow	ing amount made	payable to the Florida Department of	f State:
	Filing Fee & e 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		Street Address	,
	Amendment Section Amendment Section Division of Corporations Division of Corporations		
P.O. Box 6327	·		ircle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of 6
Poodle and Pooch Rescuellaci &
(Name of Corporation as currently filed with the Florida Dept. of State)
N0800008937 (Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopt the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Orlando, FL 32819
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. 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:
Name of New Registered Agent: Donna G Ticknor
New Registered Office Address: 5513 Palm Lake Cir (Florida street address) Orlando FL, Florida 32819 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing
Page 1 of 3

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)

<u>Title</u>	Name	Address	Type of Action
Pres	PamPearson	5317 Cypress Reserved Wither Park, 1=2,32792	☐ Add ☐ Remove
Pros_	Ponna G Ticknor	5513 Palm 4c Civ. 0 VI ando Fl 32819	☑ Add ☐ Remove
Treas	Michele Wacher	2916 S. Tanner Rd Orlando FL 32820	Add Remove
	or adding additional Articles, enter clional sheets, if necessary). (Be specific		
Article	. IV - Manner of Elect	ion	
Pursu	ant to the Bylawso	f the Comporation	
_	elected provided by	• •	
		3	

The date of each amendment(s) adoption: 10 13 2010
(date of adoption is required)
Effective date if applicable: 10 20 20 10 (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(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
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, o other court appointed fiduciary by that fiduciary) Donna G Ticknor (Typed or printed name of person signing) President
(Title of person signing)