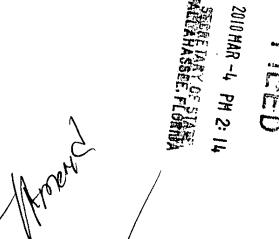
(Requestor's Name)	
(Address)	2001709272
(City/State/Zip/Phone #)	03/04/1001009017
(Business Entity Name)	
(Document Number) Certified Copies Certificates of Status	MATERIAL TARY
Special Instructions to Filing Officer:	Ken



252

**43.75

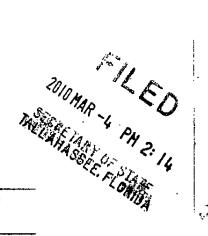


COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	PRATION: Friends of Bay	County Animal Cont	ol, Inc.
DOCUMENT NUM	BER: N09000002930	<u>_</u> .	
The enclosed Article	s of Amendment and fee are sub	omitted for filing.	
Piease return all corr	espondence concerning this mat	ter to the following:	
No. 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 -		Underwood	
	(Name or	Contact Person)	
	(Firm	/ Company)	
	118 Oal	k Ridge Place	·
	(1	Address)	
·		Beach, FL 32408 te and Zip Code)	· · · · · · · · · · · · · · · · · · ·
•	fobca	r@aol.com	restion)
For further informati	on concerning this matter, please	-	watton)
Sarah Underwoo	d	at (850) 303-10	083
(Name	of Contact Person)	(Area Code & Day	time Telephone Number)
Enclosed is a check f	or the following amount made p	ayable to the Florida Departme	ent of State:
□ \$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)
Ame Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

Articles of Amendment to **Articles of Incorporation**



Friends of Bay County Animal Control, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N09000002930

(Document Number of Corporation (if known)

Friends of Bay	County Animal Rescue, Inc.	
e new name must be distinguishable and breviation "Corp." or "Inc." "Company	contain the word "corporation"	
Enter new principal office address, if a rincipal office address <u>MUST BE A STRI</u>		
Enter new mailing address, if applicab (Mailing address MAY RE A POST OF)		
new registered agent and/or the new re		ida, enter the name of th
		ida, enter the name of th
Name of New Registered Agent:	gistered office address: (Florida street address	s) , Florida
new registered agent and/or the new re Name of New Registered Agent:	gistered office address:	<u>s)</u>

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>	<u>Name</u>	Address	Type of Action	
DVPS	Erin James	403 E 11th Street Panama City, FL 32401	☐ Add ☑ Remove	
<u>VP</u>	Wendy Chambers	14810 School Drive Panama City Beach, FL 32413	☐ Add ☑ Remove	
<u>VP</u>	Jennifer Phillips	PO Box 19688 Panama City Beach, FL 32417	☑ Add ☐ Remove	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				

The date of each amendment(s	3/2/10
The date of each amendmends	(date of adoption is required)
Effective date <u>if applicable</u> :	3/2/10
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or me adopted by the board of direct	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
	•
Dated March	2, 2010
Signature	Jacah Thylorusic
(By the have	he chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Sarah Underwood
	(Typed or printed name of person signing)
	President
•	(Title of person signing)

Page 3 of 3