## n090000037ay

(	(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



100284692931

100284692931 04/25/16--01028--008 \*\*35.00

2016 APR 25 P 2: 53



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	ON:	S, INC.		
DOCUMENT NUMBER:	N09000003724			
The enclosed Articles of An	nendment and fee are subm	itted for filing.		
Please return all correspond	ence concerning this matter	to the following:		
Nancy Norman				
	(	Name of Contact Perso	on)	
		(Firm/ Company)		
9620 167th Place North				
		(Address)		
Jupiter, FL 33478				
	(	City/ State and Zip Cod	le)	
matchk9@icloud.com				
- I	-mail address: (to be used t	for future annual report	notification)	
For further information cond	cerning this matter, please c	all:		
Nancy Norman	cy Norman 561-236-8226 at			
	(Name of Contact Person)		rea Code) (Daytime Telephone Number)	
Enclosed is a check for the f	following amount made pay	able to the Florida Dep	artment of State:	
■ \$35 Filing Fee	□S43.75 Filing Fee & □ Certificate of Status	3\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing A	Address		Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FOSTER FRIENDS INC

FOSTER FRIENDS INC	
(Name of Corporation a	is currently filed with the Florida Dept. of State)
N09000003724	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Floric amendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the c	corporation:
Match №9 Rescue & Rehab Inc	The new
name must be distinguishable and contain the word ' "Company" or "Co." may not be used in the name.	"corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	9X)
D. If amending the registered agent and/or registe new registered agent and/or the new registered	ered office address in Florida, enter the name of the loffice address:
Name of New Registered Agent:	
	(Florida street address)
Non-Baritannal Armada Clause at Landa D	(City) Florida
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing
	- Fig. の

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 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 X Add	<u>V</u> <u>Mike</u>	Doe e Jones e Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional s	ding additional Ai	. (Be specific)			
•					
			 <del></del>		
			 ·		•
	<u> </u>				
<del></del>			 		
		-			
· · · · · · · · · · · · · · · · · · ·	·				
<u> </u>			 		
	<u> </u>		 		
			 		46-46-1
		·	 	·····	
		· · · · · · · · · · · · · · · · · · ·			

The	e date of each amendment(s) adoption:	, if other than the
	e this document was signed.	
Eff	April 19, 2016  ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date cument's effective date on the Department of State's records.	will not be listed as the
Ado	option of Amendment(s) ( <u>CHECK ONE</u> )	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendmen was/were sufficient for approval.	ıt(s)
Ħ	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/wer adopted by the board of directors.	e
	Dated 4/19/14	
	Signature Nancy Im No	
	(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, of other court appointed fiduciary by that fiduciary)	
	Nancy Norman	·
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	_