

NO9000005141

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

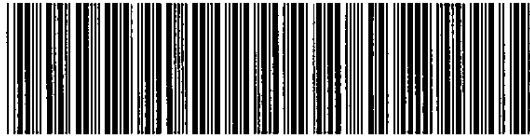
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*Amend/nc*

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
09 SEP 14 AM 11:59

SEP 17 2009

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Animal Sanctuary of Florida Prince for Animals *as per attached*  
**DOCUMENT NUMBER:** NO9505141

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

Please return all correspondence concerning this matter to the following:

Michael Hansen  
(Name of Contact Person)

Same  
(Firm/ Company)

6845 Fusell Rd  
(Address)

Blk City FL 33868  
(City/ State and Zip Code)

mnh2000@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Hansen at (863) 984-6428  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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)

**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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

09 SEP 14 AM 11:59

Animal Sanctuary of Florida, A PLACE FOR Animals, Incorporated  
(Name of Corporation as currently filed with the Florida Dept. of State)

N-0950 5141

(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:

**A. If amending name, enter the new name of the corporation:**

A PLACE FOR Animals, Sanctuary and Rescue Inc  
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)

8965 Sonora Rd  
Polk City 33868

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

6845 Fussell Rd  
Polk City Florida  
33868

**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:

Wilma Jean Cleider

New Registered Office Address:

8965 Sonora Rd

(Florida street address)

Polk City FLA

(City)

Florida 33868

(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

(Attach additional sheets, if necessary)

**Type of Action**

☐ Remove

(attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 9/10/09

Effective date if applicable: 9/10/09 (date of adoption is required)  
(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.

Dated 9/10/09

Signature Michael Hansen  
(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)

Michael Hansen  
(Typed or printed name of person signing)

President  
(Title of person signing)