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Emend



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Crest	liew Kitty Group Incorporat
DOCUMENT NUMBER: NO 9000	'
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
Barbara Davis	e of Contact Person)
Crestrica K	irm/Company)
814 Tanag	er Rd. #3
	(Address)
Fort Walton be	z a c 4, FL. 32547 State and Zip Code)
` •	used for future annual report notification)
For further information concerning this matter, pl	ease call:
Burbara Davis	at (850) 374-0310 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (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

Articles of Incorporation of

	OI			,	
Crestview Kit	-t-1 Gr	OUP I	NOUR	our ateq	1
(Name of Corporation as curren	tly filed with th	he Florida I	Dept. of State	<u> </u>	
N09000010874					
(Document Numb	er of Corporation	on (if known	n)		
			:		
Pursuant to the provisions of section 617.1006, Fi the following amendment(s) to its Articles of Inco	lorida Statutes, orporation:	this <i>Florida</i>	Not For Pro	fit Corporation	n adopts
A. If amending name, enter the new name of t		_	Ĭ ,		•
Animal Justice R	9114 6	rroup	Inco	rporat	ed
The new name must be distinguishable and con				porated" or th	ne
abbreviation "Corp." or "Inc." "Company" or				,	
B. Enter new principal office address, if applic		814	Tanas	er Rd.	43
(Principal office address <u>MUST BE A STREET</u>			alton		
		FL.	3254	1	
		_			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E ROX)	PO B	Pat 13	52	
		r / /	Inlhaa	herel	_
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		323	549	± A. S	= -
				p> ==	***************************************
D. If amending the registered agent and/or reg	ristered office a	address in F	lorida, enter	the name of	Re
new registered agent and/or the new registe	ered office add	ress:	,	ுற்ற	3 1
	Barbari			<u> </u>	? U
	814 Tai	nax es	D.d #3		īn
New Registered Office Address:	(Floric	la street add	lross)	XI PA	
	,		,	. 1	۸. ۸
E	t. Walto	p bea	<u> </u>	Florida 52	5 41
		(City)		(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered of	Registered Ag	<mark>ent:</mark> amiliar with	and accept	the obligation	s of the
position.	, ,	4 6			
±	arban b		·		
Sig	nature of New 1	Registered A	gent, if chang	ging	

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
pres	edent	Jason O. Williams	219-B Calhound A nestin FL 32541	∠ □ Add □ Remove
Pre	side,A	Barbara Davu	814 Tanager Rd #3 FT. Walton beach	Add Remove
sice f	president	teri J. Ducote	701 wh: poorw:116, Desting F.C. 32541	Add Remove
		ng or adding additional Articles, enter of		
		monar sheets, y necessary, (De speed)		
			· · · · · · · · · · · · · · · · · · ·	
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<u>.</u> ".				
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			,	

The date of each amendment(s) adop	tion: <u>5 – 15</u>	-10	1	
		option is requir	red),	
Effective date <u>if applicable</u> :	(no more than 90 days	after amendm	ent file date)	
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and	the number of	votes cast for th	e amendment(s)
There are no members or members adopted by the board of directors.	entitled to vote on the		, ŧ	nt(s) was/were
	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	, ;		. •
Dated	- 2010			
Signature <u>Bow</u>	wall Dain			
(By the chai	rman or vice chairman en selected, by an inco			
	appointed fiduciary by t	•	i tije iiailas or a	receiver, trustee, or
<u> </u>	Typed or printed	name of person	n signing)	
ρ,	esident (Title of ner			
	(Title of per	son signing)		

Page 3 of 3