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COVER LETTER

TO: Amendment Section Division of Corporations

GULF COA	ST IGUANA SANCTUARY, INC.
N10000000180	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	e are submitted for filing.
Please return all correspondence concerning t	this matter to the following:
Lenne' Nicklaus-Ball	
	(Name of Contact Person)
	(Firm/ Company)
	(Firm Company)
6730 22nd Avenue North, Suite G	
	(Address)
St Petersburg, FL 33710	
	(City/ State and Zip Code)
lenne@nofine.com	
E-mail address: (to	o be used for future annual report notification)
For further information concerning this matte	r, please call:
Lenne' Nicklaus-Ball	727 440-8090 at
(Name of Contac	
Enclosed is a check for the following amount	made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate o	g Fee & S43.75 Filing Fee & S52.50 Filing Fee f Status
Mailing Address Amendment Section	Street Address Amendment Section

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 Articles of Incorporation of

GUI	F CO.	AST	IGUA	NA.	SANCT	TIARY	INC
CIUI.		101				Unit i	

GULF COAST IGUANA SANCTUARY, INC.	at Mark the Call of the Call Day of	
(Name of Corporation as curre	ntly filed with the Florida Dept	. of State)
N1000000180		
(Document Num	ber of Corporation (if known)	.
amendment(s) to its Articles of Incorporation:		
A. It amending name, enter the new name of the corpora	tion:	
		The new
name must he distinguishable and contain the word "corport "Company" or "Co," may not be used in the name.	ation" or "incorporated" or the	abhreviation "Corp." or "Inc."
R. Enter new principal office address, if applicable:	6730 22nd Avenue North	
A. If amending name, enter the new name of the corpora name must be distinguishable and contain the word "corpora "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) 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 Name of New Registered Agent:	Suite G	-
	St Petersburg, FL 33710	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6730 22nd Avenue North	
	Suite G	
	St Petersburg, FL 33710	
D. If amending the registered agent and/or registered off	ice address in Florida, enter the	e name of the
		
Name of New Registered Agent:		
6730 22:	nd Avenue North, Suite G	
	(Florida street	t address)
St Peters	sburg	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		ations of the position.
	Signature of New Registered Age	nt, if changing

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 g Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Lenne' Nicklaus-Ball	919 59th Avenue
Add			St Pete Beach, FL 33706
Remove			
2) Change			
Add			-
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Ar (attach additional sheets, if necessary).	(Be specific)	<u>.</u> .	
			.
<u>_</u>			·
-	<u>-</u>		
			,
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			<u> </u>

l `he	te of each amendment(s) adoption:, if oth	er than ti
	s document was signed.	
Effe	ve date if applicable:	
	(no more than 90) days after amendment file date)	
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.	as the
Ada	on of Amendment(s) (CHECK ONE)	
œ⁄	se amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) as/were sufficient for approval.	
	here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.	
	November 1, 2019 Dated	
	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, or other court appointed fiduciary by that fiduciary)	
	Lenne' Nicklaus-Ball	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	