N10000004350

(Red	questor's Name)	
- (Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	





900210236109

07/22/11--01007--001 **35.00

Amens



11 7-22-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Fur Angels Ani	mal Rescue Corp	
DOCUMENT NUMI	BER: N10000004350	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles	of Amendment and fee are sub	mitted for filing.	
Please return all corre	spondence concerning this matte	er to the following:	
		tte Alvarez Contact Person)	
	(Name of	Condition of Ciscon,	
		Animal Rescue	
	(Firm)	(Company)	
	4400 1	sland Road	
	(A	(ddress)	
**	Miami	, FL 33137	
		e and Zip Code)	
		scue@gmail.com I for future annual report notifies	ntion)
For further information	n concerning this matter, please	call:	
Lissette Alvarez		at (305) 573-550	7
	of Contact Person)	(Area Code & Daytir	nc Telephone Number)
Enclosed is a check fo	r the following amount made pa	ayable to the Florida Departmen	t 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)
Ameno Divisio P.O. B	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Street Address Amendment Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	r Circle

Articles of Amendment Articles of Incorporation

11 JUL 22 PM 2: 04 SECRETARY OF STATE ALLAHASSEE, FLORIDA of Fur Angels Animal Rescue (Name of Corporation as currently filed with the Florida Debt, of State) N10000004350 (Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts

e new name must be distinguishable an breviation "Corp." or "Inc." <mark>"Compan</mark>		
Enter new principal office address, if a rincipal office address MUST BE A STR		
		
Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
If amending the registered agent and/o new registered agent and/or the new r		ida, enter the name of th
Name of New Registered Agent:		
New Registered Office Address:	(Florida street addres	<u>s)</u>
	(City)	, Florida (Zip Code)
		• •

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>	Name	Address	Type of Action
VP	Dahlia Canes	6448 West 11th Lane Hialeah, FL 33012	☐ Add ☑ Remove
<u>s</u>	Natalie Baró	9590 NW 25 St Miami, FL 33172	☐ Add ☑ Remove
<u>s</u>	Carmen L. Torres	1617 Jefferson Ave Apt 303 Miami Beach, FL 33139	☑ Add ☐ Remove
E. <u>If amending</u> (attach addit	g or adding additional Articles, enter c ional sheets, if necessary). (Be specific	hange(s) here:	
	· · · · · · · · · · · · · · · · · · ·		· ·
			

Continuation of Amending the Officers

Title Name Address Type of Action

VP Willy Chirino 4400 Island Road Add

Miami, FL 33137 Remove

The date of each amendment(s).a	doption:
Effective date if applicable:	(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 ad was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s).
There are no members or members adopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were as.
Dated July 14,	2011
Signature	xuelle Olvos
(By the chave not	hairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or art appointed fiduciary by that fiduciary)
	Lissette Alvarez
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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