N10000007208

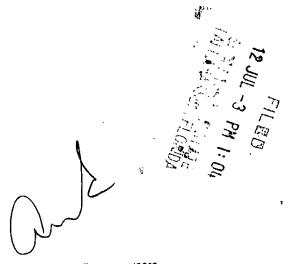
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FRIENDS OF C	CITRUS COUNTY	ANIMAL SERVICES, INC.
DOCUMENT NUMBER: N1000007	208	
The enclosed Articles of Amendment and fee are subn	nitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
	(Name of Contact Person	n) .
FRIENDS OF CITRUS COL	JNTY ANIMA	L SERVICES, INC.
	(Firm/ Company)	
1841 N. Eagle Chase Dr	,	
	(Address)	
Hernando, FL 34442		
	(City/ State and Zip Cod	e)
anmangano@gma	ail.com	
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Michael DeRose	at 352	726-0165 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Depa	artment of State:
\$35 Filing Fee \$\Bigcup \\$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	Ameno Divisio Cliftor 2661 I	Address Imment Section Immediately on of Corporations In Building Executive Center Circle Assect FL 32301



June 11, 2012

MICHAEL DEROSE 1841 N. EAGLE CHASE DR HERNANDO, FL 34442

SUBJECT: FRIENDS OF CITRUS COUNTY ANIMAL SERVICES, INC.

Ref. Number: N1000007208

We have received your document for FRIENDS OF CITRUS COUNTY ANIMAL SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 212A00016348

Carol Mustain Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)

FRIENDS OF CITRUS COUNTY ANIMAL SERVICES, INC. N10000007208

(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 n	ame of the corporati	on:		
n/a				The new
name must be distinguishable and conta		ion" or "incorporated" or	the abbreviation "C	
"Company" or "Co." may not be used i	n the name.			ST.
B. Enter new principal office address,	if applicable:	n/a		1
(Principal office address MUST BE A S				~
				F
				ယ်
				. 0
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		n/a		
				<u> </u>
			1	
D. If amending the registered agent a new registered agent and/or the ne			r the name of the	
	n/a			
Name of New Registered Agent			<u>-</u>	
New Registered Office Address;		(Florida street address)		
wen registered Office Address.				
			, Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if	changing Registered	Agent:		
I hereby accept the appointment as regis	stered agent. I am fai	miliar with and accept the a	phligations of the po	sition
\overline{Si}	gnature of New Regis.	tered Agent, if changing	and the state of t	

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	PT	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	S	Samantha Carter	204 E. Vine St. Inverness, FL 34450
2) Change X Add Remove	<u>s</u>	Christine Vanerka	4848 W HORSESHOE DR BEVERLY HILLS FL 34465
3)ChangeAddRemove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
n/a	
, , , , , , , , , , , , , , , , , , ,	
7.	1011-40
77111	

The date of	each amendmen	t(s) adoption: 04/01/2012
Effective date if applicable:		04/01/2012
		(no more than 90 days after amendment file date)
Adoption of	Amendment(s)	(CHECK ONE)
	endment(s) was/w re sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) oproval.
	re no members or d by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.
	Dated <u>06/</u>	01/2012
	Signature	Ane hongard
	have	e chairman or vice chairman of the board president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	_A	INE MANGANO (Typed or printed name of person signing) LEASURER
		(Typed or printed name of person signing)
	_10	EASURER
		(Title of person signing)