(Re	questor's Name)			
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·		
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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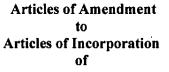
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RESPONSIBL	E PETHOOD, INC.		
DOCUMENT NUM	BER: N10000008073			
		1.0 (1)		
The enclosed Articles	of Amendment and fee are sub	milled for filing.		
Please return all corre	espondence concerning this mat	ter to the following:		
	JOE A. CA	TARINEAU, ESQ		
	(Name of	Contact Person)		
	JOE A. C	ATARINEAU, PA		
	(Firn	n/ Company)		
	91750 OVE	RSEAS HIGHWAY		
	(Address)		
	TAVERN	NER, FL 33070		
	(City/ Sta	te and Zip Code)		
	JOE@TA	XCATCPA.COM		
	E-mail address: (to be use	ed for future annual report notific	ation)	
For further information	on concerning this matter, pleas	e call:		
JOE A. CATARIN	EAU	at (<u>305</u>) <u>852-483</u> (Area Code & Daytin	33	
(Name	of Contact Person)	(Area Code & Daytin	nie Telephone Number)	
Enclosed is a check for	or the following amount made p	payable to the Florida Departmen	t of State:	
☑\$35 Fiting 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		Street Address Amendment Section		
Division of Corporations		Division of Corporation	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Cente	r Circle	
THRIBOSON, I to Joseffer		. Tallahassee, FL 3230		





RESPONSIBLE PETHOOD, INC.

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

N10000008073

(Document Num	ber of Corporati	on (if known)	
Pursuant to the provisions of section 617.1006, he following amendment(s) to its Articles of In		this <i>Florida Not For Pro</i>	ofit Corporation adopts
A. If amending name, enter the new name of	the corporation	<u>n:</u>	•
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" or			porated" or the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		91750 OVERSEAS HIGHWAY	
		TAVERNIER, FL 33070	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		91750 OVERSEAS H	HIGHWAY
· · · · · · · · · · · · · · · · · · ·		TAVERNIER, FL 33070	
D. If amending the registered agent and/or renew registered agent and/or the new regis			r the name of the
Name of New Registered Agent:	JOE A. CATARINEAU, ESQ.		
	91750 OVE	RSEAS HIGHWAY	
New Registered Office Address:	(Florida street address)		
	TAVERNIER		, Florida 33070
		(City)	(Zip Code)
New Registered Agent's Signature, if changing thereby accept the appointment as registered position.		gent: familiar with and ascept	the obligations of the
Si	ignature of New	Registered Agent, if chang	ging
	U		

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> <u>Name</u> Address **Type of Action** ☐ Add ☐ Remove _____ □ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary) (Be specific)

The date of each amendment(s) adoption: 9/9/2011		
Effective date <u>if applicable</u> :	(date of adoption is required)	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes east for the amendment(s)	
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were is.	
Dated	1/14//	
Signature	-1C1-	
have not	chairman 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, our appointed fiduciary by that fiduciary)	
_	Thomas J. Mc Dermtt (Typed or printed name of person signing)	
_	Goard Member Treasur	
	(Title of person signing)	