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COVER LETTER

TO: Amendment Section Division of Corporations

North Florid	ła ∆nimal	Rescue, INC.
TAME OF CORPORATION.	,	1103000, 1110.
DOCUMENT NUMBER: N100000113	51	
The enclosed Articles of Amendment and fee are submitted		
Please return all correspondence concerning this matter to	the following:	
Jerry Garrett		
	nne of Contact Person	n)
North Florida Animal Reso	ue	
	(Firm/ Company)	
16800 CR 137		
	(Address')	
Wellborn, FL 32094		
	y/ State and Zip Code	5)
info@northfloridaar	nimalrescu	ıe.org
1:-mail address: (to be used for	future annual report	notification)
For further information concerning this matter, please call	;	
Jerry Garrett	_{31,} 386	963-1295 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Depa	ortment of State:
(A	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	Amend Divisio Clifton	Address ment Section n of Corporations Building necutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

13 My 5: 30

North Florida Animal Res	scue, INC.		
(Name of Corporation as current)	v filed with the Flo	rida Dept. of State)	
N10000011351			
(Docu	ment Number of Co	orporation (if known)	
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporati		es, this Florida Not For Profit Corporation adopts	the following
A. If amending name, enter the new na	me of the corporat	ion:	
N/A			The new
name must be distinguishable and contain	the word "corpora	tion" or "incorporated" or the abbreviation "Corp	o." or "Inc."
"Company" or "Co." may not be used in	the name.	N/A	
B. Enter new principal office address, i (Principal office address MUST BE A ST			
(Principal Office address MOST BE A ST	REET ADDRESS)	
C. Enter new mailing address, if applie (Mailing address MAY BE A POST O		N/A	
D. If amending the registered agent and	l/or registered offic	ce address in Florida, enter the name of the	
new registered agent and/or the new	registered office a		
Name of New Registered Agent:	N/A		
		(Florida street address)	
New Registered Office Address:	.		
•	N/A	, Florida	
	(City)	(Zip C	ode)
New Registered Agent's Signature, if ch			
I hereby accept the appointment as registe	rred agent. I om fo	miliar with and accept the obligations of the position	ж.
	Signature of New	Registered Agent, if changing	

Page 1 of 4

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>Mik</u>	n <u>Doe</u> e <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change X Add Remove	Board of Director	Ludwig, Debra	16800 CR 137 Wellborn, FL 32094
2)Change XAdd	Roers of Director	Armstrong, Roy	16800 CR 137 Wellborn, FL 32094
Remove 3) Change Add X Remove	SD	Reid, Michael	16800 CR 137 Wellborn, FL 32094
Remove 4) Change Add Remove	Source of Director	Swinney, Michael R.	16800 CR 137 Wellborn, FL 32094
5) Change Add Remove			
6) Change Add Remove			

 E. If amending or adding additional Articular (attach additional sheets, if necessary). 	cles, enter change(s) here:
(attach additional sheets, if necessary).	(Be specific)
N/A	

The date of each amendment(s) adoption: 7103/13	, if other than the
date this document was signed. Effective date if applicable: 07/03/2013	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated 7/93/3	
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)	_
Jerry Garrett	
(Typed or printed name of person signing)	
PD	
(Title of person signing)	