

N110000003632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

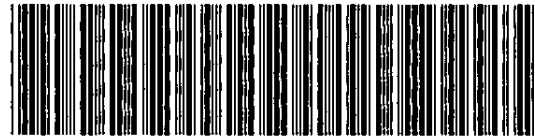
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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*Done Change
& Amend*

08/15/12--01022--001 **43.75

FILED
2012 AUG 15 PM 2:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

*DDR
8/20/12*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: **ANOTHER CHANCE RESCUE INC**

DOCUMENT NUMBER: **N11000003632**

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laurie Sullivan

(Name of Contact Person)

ANOTHER CHANCE RESCUE INC

(Firm/ Company)

6045 Lakeville Road

(Address)

Orlando, FL 32818

(City/ State and Zip Code)

orlandobullyrescue@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laurie Sullivan

(Name of Contact Person)

at (**407**) **744-7369**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

ANOTHER CHANCE RESCUE INC

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

N11000003632

(Document Number of Corporation (if known))

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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 name of the corporation:

ORLANDO BULLY Rescue, INC The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "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)

NIA JS

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NIA JS

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Laurie Sullivan

6045 Lakeville Road

(Florida street address)

New Registered Office Address:

Orlando

(City)

Florida 32818

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, 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 PT John Doe
X Remove V Mike Jones
X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u> </u> Change <u>x</u> <u> </u> Add <u> </u> Remove	<u>D</u>	<u>Brilyn Cote</u>	<u>885 N. Atmore Circle, Deltona, FL 32725</u>
2) <u>x</u> <u> </u> Change <u> </u> Add <u> </u> Remove	<u>VP/Trainer</u>	<u>Michael Cote</u>	<u>885 N. Atmore Circle, Deltona, FL 32725</u> <u>(address update)</u>
3) <u>x</u> <u> </u> Change <u> </u> Add <u> </u> Remove	<u>P/D</u>	<u>Laurie Sullivan</u>	<u>6045 Lakeville Road, Orlando FL 32818</u> <u>(address update)</u>
4) <u>x</u> <u> </u> Change <u> </u> Add <u> </u> Remove	<u>D/S/T</u>	<u>Judith Bain</u>	<u>6045 Lakeville Road, Orlando FL 32818</u> <u>(address update)</u>
5) <u> </u> Change <u> </u> Add <u>x</u> <u> </u> Remove	<u>D/T</u>	<u>Cleo Valeroso</u>	<u>4327 RUMMELL ROAD SAINT CLOUD FL 34769</u>
6) <u> </u> Change <u>x</u> <u> </u> Add <u> </u> Remove	<u>D</u>	<u>Lauren Holloway</u>	<u>6045 Lakeville Road, Orlando FL 32818</u>

Articles of Amendment
to
Articles of Incorporation
of

ANOTHER CHANCE RESCUE INC

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

N11000003632

(Document Number of Corporation (if known))

Type of Action
(Check One)

Title

Name

Address

- 7) ☐ Change
☒ Add
☐ Remove

D

Jennifer Rienas

2321 Settlers Trail

Saint Cloud, FL 34772

- 8) - change
- ADD
☒ Remove

D

Nicole Bentley

9012 Fort Jefferson Blvd
ORLANDO, FL 32822

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Please review attached sheets attached.



The date of each amendment(s) adoption: 5/11/2012

Effective date if applicable: _____
(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 8/10/2012

Signature Laurie Sullivan
(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)

Laurie Sullivan

(Typed or printed name of person signing)

President

(Title of person signing)