## N11000003891

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bus	siness Entity Nam	ne)
(Dod	Certificates	of Status
Special Instructions to F	Filing Officer:	
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	Office Use Onl	v



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-TP 9-26-11

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPOR	RATION: Moonracer No	Kill An	imal F	Rescue Inc	
DOCUMENT NUME	BER: N11000003891			<del></del>	
The enclosed Articles	of Amendment and fee are sub	mitted for	filing.		
Please return all corres	spondence concerning this mat	ter to the f	ollowing	g:	
		a William			
	(Name of	Contact P	erson)		
	Moonracer No l	Kill Anim	al REs	cue Inc	
	(Firm	/ Compan	у)		
	303 74th St				
	(/	Address)		<del></del>	<del></del>
	Holmes B	each, FL	. 34217	•	
	(City/ Star				
<del> </del>	Islandlis				
	E-mail address: (to be use		e annuai	report notification	on)
For further information	concerning this matter, please	e call:			
Lisa Williams		at (	941	345-2441	
(Name o	of Contact Person)		(Area	Code & Daytime	Telephone Number)
Enclosed is a check for	the following amount made p	ayable to	the Flori	da Department o	f State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certifi	ied Copy tional co		☑ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	<u>Address</u>			Address	is enerosed)
	ment Section			lment Section	
	n of Corporations ox 6327			on of Corporations Building	
	ssee, FL 32314			xecutive Center C	ircle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

Moonracer No Kill Anim (Name of Corporation as currently filed v N100000389	nal Rescue	inc 1	1 SFP 23 DW 12
(Name of Corporation as currently filed w	with the Florid	a Dept. of S	tate) 77 12: 07
N10000038	91	IAI	LAHASSEE ET STATE
(Document Number of Corp	poration (if kno	wn)	A SELE, AFLURIDA
Pursuant to the provisions of section 617.1006, Florida Stathe following amendment(s) to its Articles of Incorporation	n:	da Not For	Profit Corporation adopts
A. If amending name, enter the new name of the corpor	<u>ration:</u>		
The new name must be distinguishable and contain the vabbreviation "Corp." or "Inc." "Company" or "Co." ma			corporated" or the
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</u> )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4126 19	th Ave W	
	Bradent	on, FL	
	34209		
D. If amending the registered agent and/or registered of		n Florida, e	nter the name of the
new registered agent and/or the new registered office	e aduress:		
Name of New Registered Agent:		·	
New Registered Office Address:	Florida street a	ddress)	
			, Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I position.		ith and acc	ept the obligations of the
Signature of	New Registered	l Agent, if ch	anging

## 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
(attach a	ding or adding additional Articles, edditional sheets, if necessary). (Be see ganization is organized exclusive	specific)	us, educational and
scientific	purposes, including, for such pu	rposes, the making of di	stributions to
organizati	ions that qualify as exempt orga	nizations under section	501 (c) (3) of the
Internal R	evenue code, or corresponding	section of any future fed	leral tax code.
b. Upon th	ne dissolution of the organizatio	n, assets shall be distrib	uted for one or more
exempt pu	urposes within the meaning of s	ection 501 (c) (3) of the I	nternal Revenue Code,
or corresp	onding section of any future fec	leral tax code, or shall be	e distributed to the
federal go	vernment, or to a state or local	government, for a public	purpose. Any such assets
not dispos	sed of shall be disposed of by a	Court of Competent Juri	sdiction of the county in
which the	principal office of the organizati	on is then located, exclu	sively for such purposes
or to such	organization or organizations,	as said Court shall deten	mine, which are
organized	and operated exclusively for su	ich purposes.	
· · · · · ·			

The date of each amendmen	t(s) adoption: 9/20/2100
Effective date <u>if applicable</u> :	(date of adoption is required) 9/20/2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_9/20	)/2011
Signature_	Lia Williams
hav	the chairman or vice chairman of the board, president or other officer-if directors ve not been selected, by an incorporator – if in the hands of a receiver, trustee, of the court appointed fiduciary by that fiduciary)
	Lisa Williams
	(Typed or printed name of person signing)
	President
	(Title of person signing)