

N110000004346

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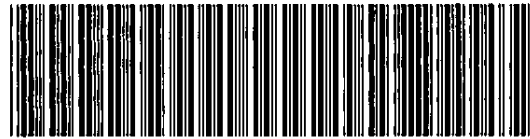
(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT -3 PM 2:37

Amend
Name chg
@ 10/3/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: A NEW BEGINNING PET RESCUE, INC

DOCUMENT NUMBER: N11000004346

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

Please return all correspondence concerning this matter to the following:

NICOLE WARRINER

(Name of Contact Person)

A NEW BEGINNING PET RESCUE, INC.

(Firm/ Company)

5365 NOB HILL RD

(Address)

SUNRISE, FL 33351

(City/ State and Zip Code)

NWARRINER717@AOL.COM

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

For further information concerning this matter, please call:

NICOLE WARRINER

(Name of Contact Person)

at (954) 615-7752

(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

A NEW BEGINNING PET RESCUE, INC.

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

N11000004346

(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT -3 PM 2:37

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:

LAST CHANCE PET 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)

11521 REXMERE BLVD

DAVIE, FL 33325

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11521 REXMERE BLVD

DAVIE, FL 33325

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:

New Registered Office Address:

(Florida street address)

(City)

Florida

(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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>VP</u>	<u>LAUREN PHILLIPS</u>	<u>5365 NOB HILL RD</u> <u>SUNRISE, FL 33351</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>T</u>	<u>GLORIA BEALS</u>	<u>5365 NOB HILL RD</u> <u>SUNRISE, FL 33351</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VP</u>	<u>THOMAS E. JONES JR.</u>	<u>11521 REXMERE BLVD</u> <u>DAVIE, FL 33325</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

This image shows a single page of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>	<u>TYPE OF ACTION</u>
<u>S</u>	<u>AMANDA MERRIT</u>	<u>618 SW 44 AVE</u> <u>PLANTATION, FL 33317</u>	<input checked="" type="checkbox"/> ADD <input type="checkbox"/> REMOVE
<u>T</u>	<u>CINDY LAW</u>	<u>16664 SW 5th WAY</u> <u>WESTON, FL 33326</u>	<input checked="" type="checkbox"/> ADD <input type="checkbox"/> REMOVE
<u>OFFICER</u>	<u>WARREN WEISSMAN</u>	<u>4371 NW 109TH AVE</u> <u>SUNRISE, FL 33351</u>	<input checked="" type="checkbox"/> ADD <input type="checkbox"/> REMOVE
<u>OFFICER</u>	<u>DEBRA ERLLENHEIM</u>	<u>6089 LAKE FRONT DR</u> <u>UNIT 25</u> <u>FORT MYERS, FL 33908</u>	<input checked="" type="checkbox"/> ADD <input type="checkbox"/> REMOVE

The date of each amendment(s) adoption: 9/20/2011
(date of adoption is required)

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 9/20/2011

Signature Nicole Warriner
(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)

NICOLE WARRINER
(Typed or printed name of person signing)

PRESIDENT,
(Title of person signing)