N11000005165

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COVER LETTER

TO Amendment Section
Division of Corporations

NAME OF CORPORATION: Pet Rescue La	aw Cen	iter, inc.	
OCUMENT NUMBER: M11000005165			
The enclosed Articles of Amendment and fee are submitted for f	filing.		
Please return all correspondence concerning this matter to the following	Howing:		
Sandra Englund			
(Name of	Contact Person)	
(Firm	/ Company)		
14180 Bridgewater Crossings	Blvd		
(A	Address)		
Windermere, FL 34786			
(City/ Stat	e and Zip Code	2)	
spfau@nonprofitlaw.co	om	Control of the Contro	
For further information concerning this matter, please call:	анниа терот т	,	
Sandra Englund	,703	304-1204	
(Name of Contact Person)		de & Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the	e Florida Depa	rtment of State:	
S35 Filing Fee S43.75 Filing Fee & S43.75 Certificate of Status Certified Copy (Addition enclosed)		ficate of Status Certified Copy	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amendo Division Clifton 2661 Ex	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301	

Articles of Amendment to Articles of Incorporation of

News Community and the State of	74.4.
(Name of Corporation as currently filed with the Florida Dept. of S	
(Document Number of Corporation (if known	<u> </u>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida</i> mendment(s) to its Articles of Incorporation:	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
Pet Rescue Law Foundation, Inc.	. The new
name must be distinguishable and contain the word "corporation" or "incor	
"Company" or "Co." may not be used in the name.	SE SE
B. Enter new principal office address, if applicable:	→
(Principal office address MUST BE A STREET ADDRESS)	
	75
	97
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	n
 If amending the registered agent and/or registered office address in F new registered agent and/or the new registered office address; 	lorida, enter the name of the
TO THE PROPERTY OF THE PROPERT	
Name of New Registered Agent:	
(Florida street ada	iress)
New Registered Office Address:	
	, Florida
(City)	(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
nereoy accept the appointment as registered agent. 1 am jamiliar with and	accept the obligations of the position.
Signature of New Registered Agent, if o	changing

Theidate of each amendment(s) adoption: January 24, 2012				
Eff	ective date <u>if applicable</u> :			
	(no more than 90 days after amendment file date)			
Ada	option 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 1/24/2012			
	Signature Signature			
	(By the 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)			
	Sandra Pfau Englund			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			

F ... K