

N11000006747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400210809384

08/08/11--01036--011 **35.00

FILED
11 AUG 19 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
C.COULLETTE

AUG 19 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Feeding Empty Little Tum mies Inc.

DOCUMENT NUMBER: ??? N11000006747

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

Please return all correspondence concerning this matter to the following:

Jane Evers

(Name of Contact Person)

Feeding Empty Little Tum mies Inc.

(Firm/ Company)

211 25th St. W.

(Address)

Bradenton, FL 34205

(City/ State and Zip Code)

FELTinc@tampabay.rr.com

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

For further information concerning this matter, please call:

Jane Evers

(Name of Contact Person)

at (941) 747-8804

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 9, 2011

JANE EVERS
FEEDING EMPTY LITTLE TUMMIES, INC.
211 25TH ST., WEST
BRADENTON, FL 34205

SUBJECT: FEEDING EMPTY LITTLE TUMMIES, INC.
Ref. Number: N11000006747

We have received your document for FEEDING EMPTY LITTLE TUMMIES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You must complete the area on the last page of the form to indicate the manner of adoption for this amendment and the date of the adoption.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 211A00018677

RECEIVED

11 AUG 18 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Feeding Empty Little Tum mies Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

N11000006747

(Document Number of Corporation (if known))

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:

--
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)

--

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

--

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)

_____, 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.

Signature of New Registered Agent, if changing

FILED

11 AUG 19 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: 8/3/11
(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 August 4, 2011

Signature Jane Evers
(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)

Jane Evers
(Typed or printed name of person signing)

Chairman / INCORPORATOR
(Title of person signing)