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And

R. WHITE SEP 13 2018

2018 SEP 13 AM 8: 07 SECRETARY OF STATE

COVER LETTER

TO: Ameridment Section Division of Corporations

NAME OF CORPORATION: Shepherd Help and Kescue, Effort, I
DOCUMENT NUMBER: N11000607407
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Undy R Newton (Name of Contact Person)
(Firm/ Company)
1825 NE 27 Dr. (Address)
Wilton Manors, FL 33306 (City/ State and Zip Code)
Cindy@Shepheranelp, or a E-mill address: (to be used for tuture armual report notification)
For further information concerning this matter, please call:
Circly Newton at 754-224-8875 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee SCertificate of Status Certified Copy (Additional Copy is enclosed) S52.50 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 Tallahassec, FL 32301

RECEIVE 18 SEP 13 AM IU: 23 SECRETARY OF THE TALLAHASSI FOR THE

September 5, 2018

CINDY R NEWTON 1825 NE 27 DR WILTON MANORS, FL 33306

SUBJECT: SHEPHERD HELP AND RESCUE EFFORT, INC.

Ref. Number: N11000007407

We have received your document for SHEPHERD HELP AND RESCUE EFFORT, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 018A00018316

Articles of Amendment

FILED

Articles of Incorporation as currently filed with the Florida Dept. of State) TALLAHASSEE (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: 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) auderdale, 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: 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.

If amending the Officers and/or Directo; s. 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 X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P	Alan Moses	Leo 20 NW 101 Terr Parkland, FC 33076
2) Change Add	<u>D</u> _	ElissaPowers	5207 NW 116 Ave Coral Springs, FL
Remove Change Add Remove		Cirdy R Newton	1825 NE 27 Dr Wilton Mancis, Fl 33306
4) Change Add Remove	P	Cathy Matuella	12324 Parker Ohdha, NE 68154
5) Change Add Remove			
6) Change Add Remove			

F. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
N/A					
		 			
<u></u>					

The date of each amendment(s) addate this document was signed.	loption:	, if other than
Effective date if applicable:		
	(no more than 90 days after amendment file date)	ı
Note: If the date inserted in this ble document's effective date on the De	pek does not meet the applicable statutory filing requirempartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac was/were sufficient for approve	dopted by the members and the number of votes cast for al.	the amendment(s)
There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendments.	ent(s) was/were
Dated	9-11-18	
Signature	Cender Maiton	
(By the chair have not be	rman or vice chairman of the board, president or other of en selected, by an incorporator – if in the hands of a rece appointed fiduciary by that fiduciary)	
	Cinox R Newton	
	(Typed or printed name of person signing	i)
	Treasurer	

the