

N1200 000 1744

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

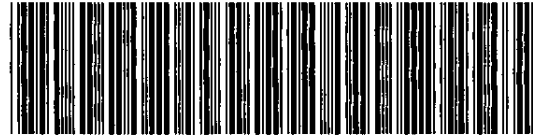
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500238748325

08/22/12--01006--003 \*\*35.00

FILED  
12 SEP 13 PM 12:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 13 2012  
C. MUSTAIN

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Foster Animal Network of Gainesville, Inc

DOCUMENT NUMBER: N12000001744

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

Please return all correspondence concerning this matter to the following:

Anna Peterson

(Name of Contact Person)

Foster Animal Network of Gainesville

(Firm/ Company)

905 NW 12<sup>th</sup> Ave

(Address)

Gainesville FL 32601

(City/ State and Zip Code)

apeterson.home@gmail.com

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

For further information concerning this matter, please call:

Anna Peterson

(Name of Contact Person)

at ( 352 ) 337-2957

(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)

*already  
Pd.*

**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 24, 2012

ANNA PETERSON  
905 NW 12TH AVE  
GAINESVILLE, FL 32601

SUBJECT: FOSTER ANIMAL NETWORK OF GAINESVILLE, INC.  
Ref. Number: N12000001744

We have received your document for FOSTER ANIMAL NETWORK OF GAINESVILLE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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.

Carol Mustain  
Regulatory Specialist II

Letter Number: 812A00021735

RECEIVED  
12 SEP 11 AM 11:26  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Articles of Amendment  
to  
Articles of Incorporation  
of

Foster Animal Network of Gainesville, Inc.

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

N 12000001744

(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)

905 NW 12<sup>th</sup> Ave.

Gainesville, FL 32601

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

905 NW 12<sup>th</sup> Ave.

Gainesville, FL 32601

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:

Anna Peterson

905 NW 12<sup>th</sup> Ave

(Florida street address)

New Registered Office Address:

Gainesville

(City)

, Florida

32601

(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.*

Anna Peterson  
Signature of New Registered Agent, if changing

FILED  
12 SEP 13 PM 12:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>Catherine Coe</u>	<u>905 NW 12<sup>th</sup> Ave</u> <u>Gainesville, FL</u> <u>32601</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Earth Pets Natural</u>	<u>(Joy Drawdy)</u> <u>404 NW 10<sup>th</sup> Ave</u> <u>Gainesville FL 32601</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Anna Peterson</u>	<u>905 NW 12<sup>th</sup> Ave</u> <u>Gainesville, FL</u> <u>32601</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Katarzyna Rugar</u>	<u>119 NE 4<sup>th</sup> St</u> <u>Gainesville, FL</u> <u>32601</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

[illegible]

The date of each amendment(s) adoption: 8-19-12

Effective date if applicable: immediately  
(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 8-20-12

Signature 

(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)

Anna Peterson  
(Typed or printed name of person signing)

secretary (new president)  
(Title of person signing)