N/a000003345

(Re	equestor's Name)	
(Ac	dress)	
(Ac	idress)	-
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		:
		,

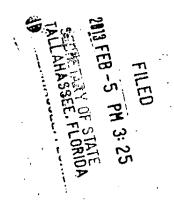
Office Use Only



200244239882

amera

02/05/13--01018--028 **35.00



DOR 2/4/13

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Tarzan's Big Ca	at Sanctuary, Inc.	
DOCUMENT NUMBER: N12000002345		
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
Melanie Boynes		
	(Name of Contact Pers	on)
Tarzan's Big Cat Sanctuary, Inc.		
	(Firm/ Company)	
3384 C Road		
	(Address)	
Loxahatchee, Florida 33470		
	(City/ State and Zip Co	de)
boynes561@yahoo.com E-mail address: (to be used	d for future annual repor	t notification)
For further information concerning this matter, please	call:	
Kathy Stearns	_{at (} 352	₎ 567-3418
(Name of Contact Person)		Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Dep	partment of State:
\$35 Filing Fee \$\text{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	Amen Divisi Clifto	t Address idment Section ion of Corporations in Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

		O1	
Tarzan's Big Cat Sanctuary, Inc	;		FILED
(Name of Corporation as current		lorida Dept. of State)	2013 FEB -5 PM 3:
N12000002345			ZUID I ED
(Documen	t Number of Corp	oration (if known)	TALLAHASSEE, FLO
ursuant to the provisions of section 617. mendment(s) to its Articles of Incorporate		utes, this Florida Not For	
. If amending name, enter the new na	me of the corpor	ation:	
I/A			The
ame must be distinguishable and contain	-	ration" or "incorporated"	or the abbreviation "Corp." or "Is
Company" or "Co," may not be used in	the name.		
. Enter new principal office address,	if applicable:	N/A	
Principal office address <u>MUST BE A ST</u>	TREET ADDRES.	<u>S</u>)	

. Enter new mailing address, if appli	cable:		
(Mailing address MAY BE A POST (N/A	
. If amending the registered agent an	d/or registered of	<u>Tice address in Florida, e</u>	nter the name of the
new registered agent and/or the new	registered office	address:	
Name of New Registered Agent:	N/A		
	N/A		
I D : 100 441		(Florida street address)	
lew Registered Office Address:			
	N/A		, Florida N/A
	(City	v)	(Zip Code)
ew Registered Agent's Signature, if ch	nanging Registere	ed Agent:	
hereby accept the appointment as registe	ered agent. I am j	familiar with and accept th	e obligations of the position.
Sign	nature of New Reg	istered Agent, if changing	

Page 1 of 4

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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		-	-
Add Remove			
2) Change			
Add Remove			
3) Change	-		
Add			
4) Change			
Add			
5) Change		- /	
Add Remove			
6) Change			
Add			
Remove		Page 2 of 4	

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

Article IX
Said organization is organized exclusively for charitable, religious, educational, and
scientific purposes, including, for such purposes, the making of distributions to
organizations that qualify as exempt organizations under section 501(c)(3) of the
Internal Revenue Code, or corresponding section of any future federal tax code.
Upon the dissolution of the organization, assets shall be distributed for one or more
exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue
Code, or corresponding section of any future federal tax code, or shall be
distributed to the federal government, or to a state or local government, for a public
purpose. Any such assests not disposed of shall be disposed of by a court of
competent jurisdiction in the county in which the principal office of the organization
is then located, exclusively for such purposes or to such organization or
organizations, as said Court shall determine, which are organized and operated
exclusively for such purposes.
·

The date of each amendment(s) adoption: 02/04/2013		
	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Ado	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 02/04/2013 Signature 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	(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)	
	Melanie Boynes	
	(Typed or printed name of person signing)	
	Р/Т	
	(Title of person signing)	