

N120000002780

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

AUG 30 2013

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FRIENDS OF Hillsborough County ANIMAL SERVICES INC

DOCUMENT NUMBER: N12000002780

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

Please return all correspondence concerning this matter to the following:

Jackie Osborne
(Name of Contact Person)

Friends of HCAS, Inc
(Firm/ Company)

P.O. Box 2191
(Address)

Seffner FL 33583
(City/ State and Zip Code)

jackieosborne@friendsofheas.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gina Stallings at (813) 785 2596
(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:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Ref. Letter # 813A00018174
Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 26, 2013

FRIENDA OF HILLSBOROUGH COUNTY ANIMAL SERVICES, INC.
JACQUELINE OSBORNE
PO BOX 2191
SEFFNER, FL 33583

SUBJECT: FRIENDS OF HILLSBOROUGH COUNTY ANIMAL SERVICES, INC.
Ref. Number: N12000002780

We have received your document for FRIENDS OF HILLSBOROUGH COUNTY ANIMAL SERVICES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 813A00018174

Articles of Amendment
to
Articles of Incorporation
of

Friends of Hillsborough County Animal Services, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

N12000002780

(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:

Jacqueline Osboene

4701 LANSING ST NE

(Florida street address)

New Registered Office Address:

ST Petersburg

(City)

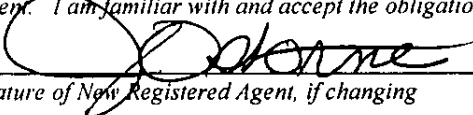
Florida

33703

(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

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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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Nancy B. Latince</u>	<u>304 Claire Dr</u> <u>Seffner FL</u> <u>33584</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Warren Elly</u>	<u>4306 Corona St</u> <u>Tampa FL 33629</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Margareta</u> <u>Henderson</u>	<u>3910 Appletree Dr</u> <u>Valrico FL 33594</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Dennis McCullough</u>	<u>8800 Crystal Creek Ct.</u> <u>Land O Lakes FL</u> <u>34638</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Bill Armstrong</u>	<u>819 Islebay Dr</u> <u>Apollo Beach FL</u> <u>33572</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Raquel Aluisy</u>	<u>19809 Wellington</u> <u>Manor Blvd</u> <u>Lutz FL 33549</u>

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

Add D Kim Kenney 14203 Shippen Way
Tampa FL 33624

Change P Jackie Osborne 4701 Lansing St NE
St. Petersburg FL
33703

Change T Gina Stallings 2806 Duncan Tree
Creek
Valrico FL 33594

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: 6/28/2013
(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 8/19/13

Signature [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)

Jacqueline Osborne
(Typed or printed name of person signing)
President
(Title of person signing)