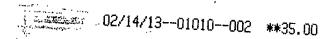
(Re	questor's Name)	<u>.</u>
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	



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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Companion Birds Ministry, Inc				
DOCUMENT NUMBER: N12000006	750			
The enclosed Articles of Amendment and fee are subm	nitted for filing.			
Please return all correspondence concerning this matte	r to the following:			
Maurice Baum				
	(Name of Contact Person	)		
	(Firm/ Company)			
4730 North 31st Court				
	(Address)	· · · · · · · · · · · · · · · · · · ·		
Hollywood, Fl 33021				
	(City/ State and Zip Code	e)		
vitaglianolegal@b				
E-mail address: (to be used	for future annual report r	notification)		
For further information concerning this matter, please of	call:			
Lillian Baum	<sub>at</sub> 954	931-4255		
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)		
Enclosed is a check for the following amount made pay	yable to the Florida Depa	rtment of State:		
\$35 Filing Fee \$\Bigcup \\$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	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)  N1200006750  (Document Number of Corporation (if known)  ursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the mendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  N/a  ame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." Company" or "Co." may not be used in the name.  S. 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:  Name of New Registered Agent:  (Florida street address)	_
(Document Number of Corporation (if known)  arsuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the nendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  /a  Ime must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." Company" or "Co." may not be used in the name.  Enter new principal office address, if applicable:  rincipal office address MUST BE A STREET ADDRESS    In/a    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:    In/a	
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(Florida street address)  W Registered Office Address:	د. پ
w Registered Office Address:	13 FEB 14 FR
n/a, Florida	
(City) (Zip Code)	
ew 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.	

Page 1 of 4

Signature of New Registered Agent, if changing

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)	Title	<u>Name</u>		<u>Addres</u> s
I) Change		n/a		
Add				
Remove				
2) Change	-	_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change			<del> </del>	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)  Articles of Dissolution				
The following dissolution provision applies in the event of				
dissolution: all assets are to be strictly distributed for charitable				
purposes pursuant to the requirements of 501(c)(3)				

The date of each amendment	(s) adoption: 2/11/13
Effective date <u>if applicable</u> :	2/11/13
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) oproval.
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.
Dated 2/1	1/13
Signature	Maurio Jan
· have n	cyairman or vice chairman of the board, president or other officer-if directors to been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
Maurice	e Baum
- · · · · · · · · · · · · · · · · · · ·	(Typed or printed name of person signing)
Preside	ent
	(Title of person signing)