N13000002882

Office Use Only



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10/05/15--01011--022 **35.00



Amend

OCT -7 2015 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	JunoHumaneinc N:				
DOCUMENT NUMBER: _	N13000002882				
The enclosed Articles of Am	endment and fee are subm	itted for filing.			
Please return all corresponde	nce concerning this matter	to the following:			
JenniferMyers					
		Name of Contact Po	erson)		<u></u>
JunoHumaneinc					
	* ***	(Firm/ Company	y)		
3900E IndiantownRd Ste6	07-311				
		(Address)	······································		
Jupiter,FL 33477					
	(City/ State and Zip	Code)		·
junohumane@gmail.com					
E	mail address: (to be used	for future annual rep	ort notificati	on)	
For further information conce	erning this matter, please o	all:			
JenniferMyers		at	954	800-3922	
	(Name of Contact Person)		(Area Code)	(Daytime Telep	hone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida l	Department o	f State:	
\$35 Filing Fee	□\$43.75 Filing Fee & C Certificate of Status	343.75 Filing Fee Certified Copy (Additional copy i enclosed)	Cert s Cert (Ad	.50 Filing Fee ifficate of Status iffied Copy ditional Copy is closed)	
<u>Mailing A</u> Amendmen			reet Address nendment Se		

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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>V Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
I) X Change	P,D	JenniferMyers	3900E IndiantownRd Ste607-311
Add		. '	JupiterFlorida,33477
Remove			
2) X Change	VP	ElizabethJacobson	3900E IndiantownRd Ste607-311
Add			JupiterFlorida,33477
Remove			
3) X Change	Т	RebeccaRobison	3900E IndiantownRd Ste607-311
Add			JupiterFlorida,33477
Remove			
4) X Change	s	TracyCafro	3900E IndiantownRd Ste607-311
Add			JupiterFL 33477
Remove			
5) Change	D	Monica Roberts	3900E IndiantownRd Ste607-311
X Add			JupiterFlorida,33477
Remove			
6) Change			
Add			
Remove			

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

Articles of Amendment Articles of Incorporation

Artic	les of Amendment		FI
Article	to es of Incorporation		FILE 2015 OCT - 5 PM - TALLAHASSEE, FLOR
	of .		" SOCT
JunoHumaneinc			TASECRE S PM
(Name of Corporation as curre	ntly filed with the F	lorida Dept. of State)	ALLAHARY OF
N13000002882			ASSEE, FIST,
(Document Num	ber of Corporation (if	(known)	
Pursuant to the provisions of section 617.1006, Florida Statut	tes, this <i>Florida Not i</i>		
mendment(s) to its Articles of Incorporation:		or croju corporation (
A. If amending name, enter the new name of the corpora	tion:		
- A DESCRIPTION OF PARTY PARTY AND HOLD OF MICE CONDICTION	700 14 p 5.5		
name must be distinguishable and contain the word "corpora	ation" or "incornera	ted" or the abbreviation	"Corn" or "Inc."
Company" or "Co," may not be used in the name.	anon or incorpora	ica oi iie aovierialion	corp. or rac.
Fotos new seineinel effice address if applicables	3900E Indiantow	nRd Ste607-311 Jupite	r,FL 33477
 Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS 	()	-	, <u>.</u> .
	-		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3900E Indiantow	nRd Ste607-311 Jupite	er,FL 33477
(All and a second secon			
•			<u>-</u>
). If amending the registered agent and/or registered off	ioo adduses in Florid	lo anton the name of th	•
new registered agent and/or the new registered office		ia, enter the name <u>or to</u>	<u> </u>
Name of Nov. Begintered Aparts. NA			
Name of New Registered Agent:			
		(Florido etrast address)	
New Registered Office Address:		(Florida street address)	
		Dia-: J	0
	(City)	Florid, Florid	a Code)
	• • •	,	•

Signature of New Registered Agent, if changing

	5/1/15 e date of each amendment(s) adoption:	, if other than the
date	e this document was signed.	
Eff	ective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not burnent's effective date on the Department of State's records.	e listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	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 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) JenniferMyers (Typed or printed name of person signing)	_
	President	
	(Title of person signing)	