# M130000003000

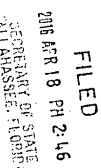
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Note of lack

# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	
13000003000 DOCUMENT NUMBER:	
The enclosed <i>Articles of Amendment</i> and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jeanine Cohen	
(Name of Contact Per	son)
(Firm/ Company)	
4220 Waterville Ave	
(Address)	-
Wesley Chapel, FI 33543	
(City/ State and Zip C	ode)
jeaninecohen@gmail.com	
E-mail address: (to be used for future annual repo	rt notification)
For further information concerning this matter, please call:	
Jeanine Cohen	813 625-2405
	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida De	epartment of State:
S35 Filing Fee Certificate of Status (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is Enclosed)

# **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

# Articles of Amendment to Articles of Incorporation of

ResQCats, Inc		
(Name of Corporation as curren	tly filed with the Flori	da Dept. of State)
N13000003000		
(Document Number	er of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
ResQCats of Florida, Inc		The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.  B. Enter new principal office address, if applicable:	ion" or "incorporated NA	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	- V (	是 为
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ν/-A	8 PM 2: 45
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		enter the name of the
Name of New Registered Agent:	) <del>[ +</del> ]	
New Registered Office Address:	(Flo	rida street address)
		, Florida
——————————————————————————————————————	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered is the language the appointment as registered agent. I am fam		he obligations of the position.
	anature of New Registe	pred Agent if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a	nd
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</u> <u>N</u>	ohn Doe like Jones ally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			-84-11-11-11-11-11-11-11-11-11-11-11-11-11
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
N/A:					
- <del></del>					
- · · · · · · · · · · · · · · · · · · ·					
<del></del>					

	e date of each amendment(s) adoption:e this document was signed.	, if other than the
Eff	ective date if applicable:	
	(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 rument's effective date on the Department of State's records.	be listed as the
Ad	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.	
	4/13/2016 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)	
	Jeanine Cohen	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	