IPBOODUN

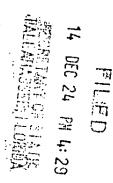
(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone#)
PICK-UP	☐ WAIT	MAIL
(É	Business Entity Name)
· (D	Occument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	o Filing Officer:	
		:

Office Use Only



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And

DEC 30 2014

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: W.A.N.D.	A. Cares	s Inc	•
DOCUMENT NUMBER: N1400002	141		·
The enclosed Articles of Amendment and fee are subr	nitted for filing.		
Please return all correspondence concerning this matter	er to the following	ζ:	
WANDA LASHER			
	(Name of Contac	t Person)	
W.A.N.D.A. CARES INC	•		
	(Firm/ Comp	pany)	
3663 NE 175TH STREE	T ROAL)	
	(Address	s)	
CITRA, FL 32113			
• *	(City/ State and 2	Zip Code)	
DEBWITHJIFFY@	OHAY	O.CC	MC
E-mail address: (to be used	for future annua	report no	tification)
For further information concerning this matter, please	call:		
WANDA LASHER	3. at (3.	52 ⁾	2073605
(Name of Contact Person)			e & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Flori	ida Depart	ment of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Copy (Additional co- enclosed)	у .	□\$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		Division Clifton B 2661 Exe	nent Section of Corporations

Articles of Amendment to Articles of Incorporation

FILED

W..A.N.D.A. CARES INC.

14 DEC 24 PH 4: 29

(Name of Corporation as currently filed with the Florida Dept. of State)
N1400002141

(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:

N/A
N/A
ice address in Florida, enter the name of the address:

(Florida street address)
, Florida, Vin Code)
f

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 Doo Mike Jor Sally Sm	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Remove				
2) Change		_		
Remove				
3) Change Add		_		
Remove			•	
4) Change Add		_		
Remove 5) Change				
Add				
Remove 6) Change			,	
Add		_		
Remove				

(attach additional sheets, if necessary). (Be specific)					
We wish to amend Article III to read as follows:					
The exempt purpose of the not for profit is a charitable one.					
We provide an animal rescue treatment and placement of abandoned					
dogs and cats. We visit high kill shelters and rescue animals and					
take them to area vets for shots and we also spay and neuter them					
and then place them in forever homes.					
Upon dissolution of our organization, our remaining assets will					
be used exclusively for exempt purposes, such as charitable,					
religious, educational, and/or scientific purposes.					

E. If amending or adding additional Articles, enter change(s) here:

Tha	date of each amendment	(c) adoption: 12/11/2014	, if other than the
	this document was signed.	· · · · · · · · · · · · · · · · · · ·	, if other than the
E.ffe	Affective date if applicable: 12/11/2014		
		(no more than 90 days after amendment file date)	- ,
Ada	option of Amendment(s)	(CHECK ONE)	
	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) proval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	Dated 12/	1,1/2014 Orah Hung	
	(By the	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	WAND	A LASHER	
		(Typed or printed name of person signing)	
	PRESI	DENT	
		(Title of person signing)	