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| (Requestor's Name)                      |                 |
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| (Business Entity Name)                  | 09/14/20~-01019 |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| PET SUPPORT INC  NAME OF CORPORATION:  |
|--|
| N14000004680   |
| DOCUMENT NUMBER:   |
| The enclosed Articles of Amendment and fee are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:  |
| CLAUDIA REGINA CABRERA   |
| (Name of Contact Person)   |
| PET SUPPORT INC  |
| (Firm/ Company)  |
| 6471 SW 5TH STREET   |
| (Address)  |
| PEMBROKE PINE, FL 33023  |
| (City/ State and Zip Code)   |
| Claudiaklaus2003@YAHOO.COM.BR  |
| E-mail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:   |
| CLAUDIA REGINA CABRERA 954 544-7880  |
| (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:  |
| \$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is Enclosed)  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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Z415 N. Monroe Street, Suite 610

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

| PET SUPPORT, INC  |   |   |
|---|---|---|
| (Name of Corporation as currently filed with the Flor   | ida Dept. of State)                           |   |
| N14000004680  |   |   |
| (Document N   | lumber of Corporation (if kno                 | own)                                    |
| Pursuant to the provisions of section 617,1006, Florida S amendment(s) to its Articles of Incorporation:  | tatutes, this <i>Florida Not For</i>          | Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corp   | oration:                                      |   |
|   |   | The new                                 |
| name must be distinguishable and contain the word "cor<br>"Company" or "Co." may not be used in the name.   | poration" or "incorporated"                   | or the abbreviation "Corp." or "Inc."   |
| B. Enter new principal office address, if applicable:   |   |   |
| (Principal office address <u>MUST BE A STREET ADDR</u>  | <u>ESS</u> )                                  |   |
|   |   | c 3                                     |
|   |   |   |
| C. Enter new mailing address, if applicable:  |   |   |
| (Mailing address MAY BE A POST OFFICE BOX)  |   |   |
|   |   |   |
|   |   | 12:                                     |
|   |   |   |
| D. If amending the registered agent and/or registered   | l office address in Florida, o                | enter the name of the                   |
| new registered agent and/or the new registered of   | fice address:                                 |   |
| Name of New Registered Agent:   |   |   |
|   |   |   |
|   | (Flo  | rida street address)                    |
| New Registered Office Address:  |   |   |
|   |   | , Florida                               |
|   | (City)  | (Zip Code)                              |
| New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I describe the appointment as registered agent. | tered Agent;<br>am familiar with and accept t | he obligations of the position.         |
|   | Signature of New Registe                      | red 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 <math>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   | PT John D<br>V Mike Jo<br>SV Sally S     | ones   |   |
|------------------------------------|--|--|---|
| Type of Action<br>(Check One)      | <u>Title</u>                             | Name   | Address                                     |
| 1) × Change Add                    | <u>P</u>                                 | CLAUDIA REGINA CABRERA                         | 6471 SW 5th STREET PEMBROKE PINES, FL 33023 |
| Remove                             |  |  |   |
| 2) Change Add                      |  |  |   |
| X Remove 3) Change Add Remove      | Р  | JEANETH SOULIER                                | 710 STANTON DR<br>WESTON, FL 33326          |
| 4) Change Add                      |  |  |   |
| Remove                             |  |  |   |
| 5) Change Add                      |  |  |   |
| Remove                             |  |  |   |
| 6) Change Add                      | ***************************************  |  |   |
| Remove                             |  |  |   |
| E. If amending or additional sheet | ng additional Art<br>ets, if necessary). | ticles, enter change(s) here:<br>(Be specific) |   |
|                                    | <del>-</del>                             |  |   |
|                                    |  |  |   |
|                                    |  |  |   |
|                                    |  |  |   |

|   | (CHECK ONE)   |
|---|---|
| Note: If the date inserted in this bloc<br>document's effective date on the Dep | ck does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records. |
| Enective date ii applicable:  | (no more than 90 days after amendment file date)  |
| date this document was signed.  |   |
| The date of each amendment(s) ad  | option: if other than   |
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| 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 09/10/2020  |
| 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) |
| JEANETH SOULIER   |
| (Typed or printed name of person signing)   |
| PRESIDENT   |
| (Title of person signing)   |