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COVER LETTER

TO: Amendment Section Division of Corporations

MayMay & Katie's Rescue Angels Inc. NAME OF CORPORATION:
N14000006915
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Eddie Jean Russell (Name of Contact Person)
(Name of Contact Person)
MayMay & Katie's Rescue Angels Inc.
(Firm/ Company)
501 62nd Ave South
(Address)
Saint Petersburg Fl. 33705
(City/ State and Zip Code)
srtjazz8@aol.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Cadie Flan Russell at 727 482-8232 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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

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 Articles of Incorporation of

	to	
Artic	les of Incorporation	A
Ann Marc C. Mariala Dannara Anna I. Lan	of	
MayMay & Katie's Rescue Angels Inc.		9 5
(Name of Corporation as curr	ently filed with the Flori	ida Dept. of State)
1400006915		
(Document Nur	nber of Corporation (if kr	nown)
arsuant to the provisions of section 617.1006, Florida Stati nendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not Fol</i>	ida Dept. of State) nown) r Profit Corporation adopts the following
If amending name, enter the new name of the corpor	ation:	
NA		The new
ame must be distinguishable and contain the word "corportion of the corportion of th	ration" or "incorporated	
Enter new principal office address, if applicable:	NA	
rincipal office address <u>MUST BE A STREET ADDRES</u>		
Enter new mailing address, if applicable:	.1 .	
(Mailing address MAY BE A POST OFFICE BOX)	NA	
If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florida, e address:	enter the name of the
Name of New Registered Agent:	NA	
Also Parties LOO ALL	(Flo	orida street address)
New Registered Office Address:	.1	
	NA	, Florida
	(City)	(Zip Code)

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 <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 V SV	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	Name		Address
1) Change Add	·		NA	NA
Remove				
2) Change			NA	Na
Add				
Remove 3) Change			NA	Nq
Add				
4) Change Add		_	NA	Nq
Remove				
5) Change Add			NA	Na
Remove				
6) Change			NA	MO
Add				
Remove			D 4.4	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
Said Organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such				
purposes, the making of distributions that qualify as exempt organizations described under 501(c)(3) of the Internal Revenue				
Code, or corresponding section of any future tax code.				
Upon the dissolution of the Organization, assets shall be distributed for one or more exempt purposes within the meaning of				
501(c)(3) of the Internal Revenue Code, or corresponding section of any future deferral tax code, or shall be distributed				
to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall				
be disposed of by a court of competent jurisdiction in the county in which the principal office of the organization is then				
located, exclusively for such purposes or to such organizations, as said Court shall determine, which organizes and				
operated for such purposes.				
·				
,				

	e date of each amendment(s) adoption: $\frac{5/29/2015}{}$ e this document was signed.	, if other than the
Effe	fective 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 cument's effective date on the Department of State's records.	I not be listed as the
Ado	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.	
	Dated 5/29/2015	
	Signature Jupan Robert	
	(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)	
	(Typed or printed name of person signing)	
	Vice President (Title of person signing)	