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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION		Rescue Mission, Inc			
DOCUMENT NUMBER:	N14000007771				
The enclosed Articles of An	nendment and fee are sub	mitted for filing.			
Please return all correspond	ence concerning this matt	er to the following:			
Lisa M. Letson					
		(Name of Contact Perso	on)		
True & Faithful Pet Rescue	Mission, Inc				
		(Firm/ Company)		-	
266 N. Jackson Rd					
		(Address)			
Venice, FL 34292					
		(City/ State and Zip Cod	de)	· · · · · · · · · · · · · · · · · · ·	
trucfaithfulrescuemission@	gmail.com				
Ţ	E-mail address: (to be use	d for future annual report	notification	n)	
For further information con-	cerning this matter, please	e call:			
Lisa M. Letson			11-234-6531		
	(Name of Contact Person	n) (A	rea Code)	(Daytime Telephone	: Number)
Enclosed is a check for the	following amount made p	ayable to the Florida Dep	partment of	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing A	Address	Street	Address		

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

True & Faithful Pet Rescue Mission, Inc (Name of Corporation as currently filed with the Florida Dept. of State) N14000007771 (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: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 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 Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change × Add	D	William Letson	266 N. Jackson Rd Venice, FL 34292
Remove			
2) Change Add			
Remove 3 ) Remove Add Remove	<del></del>		
4) Change Add			
Remove			<del></del>
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
N/A		·	
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The date of each amendment(s) add date this document was signed.	option:	<u>.</u>		, if other than the
Effective date if applicable:	(no more than 90 do			
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the appli artment of State's record	icable statutory filing s.	g requirements, this date	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were add was/were sufficient for approval	opted by the members and	d the number of vote	es cast for the amendme	ent(s)

There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard 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)
	A
	Lisa M. Letson Lisa m. Letson Aug 3, 2003
	Lisa M. Letson LISA M. LETSON HUCJ 3, 2003
	(Typed or printed name of person signing)
	President Why Ang 3 Wa 3
	President Hug. 3, 2003
	(Title of person signing)
	( / V )