## N14000011357

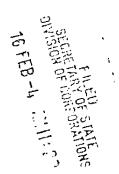
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Fly Away He	me Herding Dag Resour, Inc.
DOCUMENT NUMBER: 114000113	57
The enclosed Articles of Amendment and fee are submitted f	For filing.
Please return all correspondence concerning this matter to the	e following:
Suzanne Semago	e of Contact Person)
` (Name	e of Contact Person)
(F	'irm/ Company)
1005 22nd 5t.w.	
	(Address)
Bradenton, FL 34205	State and Zip Code)
agility (1715 Ocmail. E-mail address: (to be used for fut	
For further information concerning this matter, please call:	
SUZZANE SEMBOD (Name of Contact Person)	at <u>Q 41 - 725 - 0585</u> (Area Code) (Daytime Telephone Number)
(Name of Contact Person)  Enclosed is a check for the following amount made payable t	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43. Certificate of Status Certificate	.75 Filing Fee & \$\times\$\$52.50 Filing Fee
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to

## Articles of Incorporation

	of	<i>6</i> <sup>∞</sup>	
Fly Away Home Heiding	Da Resce	IE, Ira. &	
Name of Corporation as current	ly filed with the Flori	da Dept. of State)	
n 14000011357			
(Document Number	er of Corporation (if kn	own)	
ursuant to the provisions of section 617.1006, Florida Statutes mendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For</i>	Profit Corporation adopts the following	
. If amending name, enter the new name of the corporation	on:		
ame must be distinguishable and contain the word "corporal Company" or "Co." may not be used in the name.	ion" or "incorporated	The new or the abbreviation "Corp." or "Inc."	
. Enter new principal office address, if applicable:	Suzann	e Semago	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	(S) 1005 22nd 54 W		
	Braden	ton. FL 34205	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
If amending the registered agent and/or registered offic new registered agent and/or the new registered office actions.  **The control of the new registered of the new reg		enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Flo	rida street address)	
		, Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing Registered Abereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept t	he obligations of the position.	
Si	gnature 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 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           V         Mike John S           SV         Sally S	ones			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
Change Add Remove	<u> </u>	Lisa Parks	2637 Rachael Aue Fernandina Beach, Fl 32034		
2) Change Add Remove	P	Jennifer Johnson	14625 Lake Forest Dr Lutz, FL 33559-3201		
3) Change Add Remove	UP	Benjamin Kelly	14625 Lake Forest Dr Lutz, FL 33554-320		
4) Add Remove	<u> </u>	Marcia Machtiger	938 Timber And Ave PHODurg, PA 15226		
5) Change Add Remove	<b>D</b>	Suzanne Semaco	100522nd 5+40 Podenton, FL 34208		
6) Change Add Remove					

attach additional s	ding additional Ar heets, if necessary).	(Be specific)				
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	e date of each amendment(s) adopt	ion:	, if other than the
date	this document was signed.		
Eff	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this block of ument's effective date on the Depart	does not meet the applicable statutory filing requirements, this date ment of State's records.	will not be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
Þ	The amendment(s) was/were adopt was/were sufficient for approval.	ed by the members and the number of votes cast for the amendmen	nt(s)
	There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/wer	·e
	Dated <u>2-1-7</u>	2016	
	have not been s	or vice chairman of the board, president or other officer-if directed elected, by an incorporator – if in the hands of a receiver, trustee, cointed fiduciary by that fiduciary)	
	Su-	(Typed or printed name of person signing)	_
	REQU	Stered Flyent - Secretary - (Title of nerson signing)	<u>B</u>