# N/40000/1670

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | ldress)            | <del></del> |
| (Ad                     | ldress)            |             |
| (Cit                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | isiness Entity Nan | ne)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
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### COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

| NAME OF CORPORATION:                        | PETS BFF                                 | INC   |  |
|---|--|---|--|
| DOCUMENT NUMBER:                            | N 1400                                   | 00 11670  | )  |
| The enclosed Articles of Amendmer           | tt and fee are submit                    | tted for filing.  |  |
| Please return all correspondence con        | cerning this matter (                    | to the following:   |  |
|   | Connie                                   | SNYDER Sume of Contact Perso  | DONTAG DVM   |
|   |  | siting Vet  |  |
|   |  | (Firm) Company)   |  |
|   | 8279                                     | SW 120  | 1 Street   |
|   | Min                                      | (Address)  Ki / FL. 3  Tity/ State and Zip Cod                              | 3156   |
| E-mail ac                                   |  | 16 85 (b) Corfuture annual report   |  |
| For further information concerning t        |  | ( )   | ,  |
| _   |  |   | 305 - 214 - 8183<br>ren Code) (Daytime Telephone Number)                             |
| (Name e                                     | of Confact Person)                       | (A  | rea Code) (Daytime Telephone Number)   |
| Enclosed is a check for the following       | g amount made paya                       | ble to the Florida Dep  | irtment of State:  |
| ☑ \$35 Filing Fee □\$43<br>Cer              | .75 Filing Fee & □<br>tificate of Status | l\$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
| <u>Mailing Address</u><br>Amendment Section | on                                       |   | Address Iment Section  |

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

#### Articles of Amendment to

#### to Articles of Incorporation

| PETSBFF I  | we will be the second of the s |                             |
|--|--|-----------------------------|
| (Name of Corporation as current  | tly filed with the Florida Dept. of State)   | <del></del>                 |
| N 14 0000 11   | <b>6</b> 7 <i>0</i>  |                             |
| (Document Numbe  | er of Corporation (if known)   |                             |
| Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:        | s, this Florida Not For Profit Corporation adop-   | ts the following            |
| A. If amending name, enter the new name of the corporation   | on:  |                             |
| name must be distinguishable and contain the word "corporati<br>"Company" or "Co." may not be used in the name.        | ion" or "incorporated" or the abbreviation "Co   | The new<br>orp, " or "Inc " |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )      | 3MME   | 10 JAN FI                   |
|  |  | 122 P                       |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                                | SAME   | 7.                          |
| D. If amending the registered agent and/or registered office   | re address in Florida, enter the name of the   | I did this edit             |
| new registered agent and/or the new registered office ac   |  |                             |
| Name of New Registered Agent:  | INIE SNYDER SOUTHE, DVM  | on line already,            |
| New Registered Office Address:   | 19 Sw 124 Street Minmi (Florida street address)  | -R-33156                    |
|  | Florida (City) (Zip Cod  | 33156                       |
| New Registered Agent's Signature, if changing Registered Albereby accept the appointment as registered agent. I am fan |  | tion.                       |
|  | gnature of New Registered Agent if changing  |                             |
|  | guature of New Register of Ageny, if changing  |                             |

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.

| ATRE SOMES, F ES REM             | ore, and bung tomi |                           |   |
|----------------------------------|--------------------|---------------------------|---|
| Example: X Change X Remove X Add |                    | Doc<br>Jones<br>Smith     |   |
| Type of Action<br>(Check One)    | <u>Title</u>       | <u>Name</u>               | Address   |
| 1) _ Change<br>Add<br>Remove     | P CEO              | Kenneth B Swyder, DVM     | 8279 SN 124 Sneet<br>Minni, FL., 33156            |
| 2) Change                        | CEO,<br>PTS'D      | Connie Swyder Sowrag, DVM | 8279 SW 124 Street Minni, Fl. 33156               |
| Remove 3 ) Change Add X Remove   | D                  | Jones, Rosa DR -          | 18635 So to the<br>Minmi, FL.<br>331\$7           |
| 4) Change Add Remove             | <u>S</u>           | Schwnetz Rek De           | 8030 SW 97 Street  Minmi, PL.  33176              |
| 5) Change ; Add Remove           | D                  | Swinger, Pobeet Dr        | 2667 EAST Commercial Drive<br>Minmi, FL.<br>33308 |
| 6) Change<br>Add<br>Remove       | _D                 | Brisinde Silvia _         | 13145 Old Citter Road<br>Miami, FL<br>33158       |
| Remove                           |                    | Page 2 of 4               | 22128   |

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<br>V Mike J<br>SV Sally S | ones           |   |
|----------------------------------|-------------------------------------|----------------|---|
| Type of Action<br>(Check One)    | Title                               | <u>Name</u>    | <u>Addres</u> s                         |
| 1) Change Add Remove             | I                                   | Brazier Connie | 5950 SW 80 Sweet<br>Minmi, FL.<br>33143 |
| 2) Change Add                    |                                     |                |   |
| Remove                           |                                     |                |   |
| 3 ) Change Add                   |                                     |                |   |
| Remove                           |                                     |                |   |
| 4) Change Add                    |                                     |                |   |
| Remove 5) Change                 |                                     |                |   |
| Add                              |                                     |                |   |
| Remove 6) Change                 | <b>,</b>                            | •              |   |
| Add                              |                                     |                |   |
| Remove                           |                                     | Day 2 at 1     |   |

| E. Hanending or adding additional Articles, entire change(s) here:  (attach additional sheets, if necessary). (Respective)        |
|---|
| 1/5/2019  |
| To Whom it may concern,   |
| PETSBFF INC hos been dormant since 2014.  I am technically the only peeson involved presently                                     |
| ALL that needs to be done is my legar name change from Kenneth B. Snyder, DVM to Connie Snyder Southe, DVM                        |
| Since I am the only person involved I am listing myself as PS, T, D, CEO (IF I can not designate them all, plz advise or out      |
| All other officers can be deleted at this time i'd  |
| Should you need any additional information, pierse call me on my cell phone # 305-216-8183 or email to Kind connie 850 gmail. com |
| Connil & January 1  |

Page 3 of 4

P.S. Legal name change by the courts are enclosed.

I hank you

|      | date of each amendment(s) adopt this document was signed.                   | tion:   | , if other than th   |
|------|---|---|----------------------|
| Effe | ective date if applicable:  |   |                      |
|      |   | (no more than 90 days after amendment file date)  |                      |
|      | e: If the date inserted in this block unrent's effective date on the Depart | does not meet the applicable statutory filing requirements, this date will ment of State's records.   | not be listed as the |
| Ado  | option of Amendment(s)  | (CHECK ONE)   |                      |
|      | The amendment(s) was/were adop-<br>was/were sufficient for approval.        | ted by the members and the number of votes cast for the amendment(s)  |                      |
| Ă    | There are no members or members adopted by the board of directors.          | entitled to vote on the amendment(s). The amendment(s) was/were   |                      |
|      | Dated 0107 20   | 219   |                      |
|      | Signature anie  | ! Youtry ! W_   |                      |
|      | have not been s   | or vice plairman of the board, president or other officer-if directors elected, by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary) |                      |
|      | Conni   | e Soyder Sonotal, DVM   |                      |
|      |   | (Typed or printed name of person signing)   |                      |
|      |   | LEO   |                      |
|      |   | (Title of person signing)   |                      |

FL. Rept. of State 3500

## IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT, IN AND FOR MIAMI-DADE COUNTY, FLORIDA

|          | TO ACTO CONTINUES ENTEN, COOKET, LECKHOM   |
|----------|--|
|          | Case No.: <u>2017-17590-FC-01</u> Division: Family   |
| KENN     | NETH BRUCE SNYDER, Petitioner,   |
|          | FINAL JUDGMENT OF ADULT CHANGE OF NAME   |
| Florid   | THIS CAUSE, having come before the Court on Monday, September 18, 2017, for a g on Petitioner's PETITION FOR CHANGE OF NAME (ADULT) under section 68.07, a Statutes, the Court having read the file and being otherwise advised in the premises hereby as follows: |
| 1.       | Petitioner is a bona fide resident of Miami-Dade County, Florida;  |
| 2.       | Petitioner's request is not for any ulterior or illegal purpose;   |
| 3.<br>5V | This Final Judgment will not affect either Parties rights in regards to related case number: 2004-21469-EC-04, which remains pending before this Honorable Court, and shall proceed Captioned as follows: ; and  |
| +        | Committee ship world 1911 and  |

4. Granting this petition will not in any manner invade the property rights of others, whether partnership, patent, good will, privacy, trademark, or otherwise;

It is Hereby ORDERED and ADJUDGED as follows:

(I) Petitioner's present name, <u>Kenneth Bruce Snyder</u> is hereby changed to: <u>Connie Snyder Sontag</u> by which Petitioner shall hereafter be known.

DONE AND ORDERED this at Miami-Dade County, Florida this day of

Sarah Zabel

Circuit Court Judge

Copies furnished to: Petitioner