N1500000 4906

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	dation, INC.				
N15000004906 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are st	ubmitted for filing.				
Please return all correspondence concerning this m	atter to the following:				
Bruce Jenkins					
	(Name of Contact I	Person)			
Cats Cradle Foundation, INC					
	(Firm/ Compar	ny)			
17111 Orangewood Drive					
	(Address)				
Lutz, FL 33548					
	(City/ State and Zip	Code)			.
cats.cradle.sanctuary@gmail.com					
E-mail address: (to be u	sed for future annual re	eport notificatio	n)		
For further information concerning this matter, plea	ase call:			2024 C 77	
Bruce Jenkins	а	813	843-7193		4 1 1 mm
(Name of Contact Pers			(Daytime Tele	phone Number	Chart4+
Enclosed is a check for the following amount made	payable to the Florida	Department of	State:	V i mo	-
☐ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Statu	_	Certif is Certif	0 Filing Fee Teate of Status Ted Copy tional Copy is osed)	2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A D	treet Address amendment Sect bivision of Corp The Centre of T	orations		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Cats Cradle Foundation, INC.			
Name of Corporation as currently filed with the Flo	orida Dept. of State)		
N15000004906			
(Document	Number of Corporation	(if known)	
Pursuant to the provisions of section 617,1006. Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida No	ot For Profit Corporation	adopts the following
A. If amending name, enter the new name of the con	rporation:		
			The new
name must be distinguishable and contain the word "ce "Company" or "Co." may not he used in the name	rporation" or "incorpo	rated" or the abbreviation	
B. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	<u>(</u>)		
	,		
D. If amending the registered agent and/or registers	ed office address in Flo	rids, enter the name of t	20
new registered agent and/or the new registered of		Transferred the famile of the	
N CV D			33
Name of New Registered Agent:			8
			L'
New Registered Office Address:		(Florida street address)	
New Negistered Confee Address.			်းကို ယူ
		Florid	
	(City)	(Zi _I	Code)*1
New Registered Agent's Signature, if changing Regi- hereby accept the appointment as registered agent. I		econs the abligations of the	2 novition
полого ассерение промишен из годинегой идень. Т	an januar van ana a	eepe inc marganims of the	грозион.
	Signature of New E	Registered Agent, if changi-	2112
	argument of Den II	одынги туст, у статуп	16,5

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: \underline{X} .Change \underline{X} Remove \underline{X} Add	PT John I V Mike SV Sally:	<u>Jones</u>		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add	<u>S</u>	Nikki Zold	9029 Aspen Hollow PLace Rivrview, FL 33578	
× Remove				
2) Change x Add	<u>S</u>	Nikki Jenkins	9909 Azalea Bloom Way #303 Riverview, FL 33578	
Remove 3 1 Change Add Remove				
4) Change Add			1/4 1/4 7	7
Remove 5) Change Add			8 T	֡֝֝֟֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
Remove 6) Change Add				
E. If amending or add (attach additional she		rticles, enter change(s) here: (Be specific)		

The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date)	, if other than the

The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

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 3/4/2024
Signature S T
(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)
Bruce Jenkins
(Typed or printed name of person signing)
President

(Title of person signing)