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JUN 2 9 2017 S. YOUNG

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Parrot Cove Exotic	Bird and Environme	ental Education I	Preserve, Inc.
N15000007757 DOCUMENT NUMBER:			- <del></del>
The enclosed Articles of Amendment and fee are sul	bmitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
Greg Poulain			
-	(Name of Contact	Person)	
Parrot Cove Exotic Bird and Environmental Educati	on Preserve, Inc.		
	(Firm/ Compa	ny)	
P.O. Box 91			
	(Address)		
Myakka City, FL 34251			
	(City/ State and Zi	p Code)	
volvocamper@yahoo.com			
E-mail address: (to be use	ed for future annual r	eport notification	1)
For further information concerning this matter, pleas	e call:		
Greg Poulain	:	941 at	718-7770
(Name of Contact Perso	on)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Certif vis Certif	0 Filing Fee icate of Status ied Copy tional Copy is sed)
Mailing Address Amendment Section		Street Address Amendment Sect	ion

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

Parrot Cove Exotic Bird and Environmental Education	ation Preserv	e, Inc.	
(Name of Corporation	n as current	ly filed with	the Florida Dept. of State)
N15000007757			
(Docur	ment Numbe	r of Corporat	ion (if known)
Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes	, this <i>Florida</i>	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the	e corporatio	<u>m:</u>	
			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam  B. Enter new principal office address, if applications	<u></u>	on" or "inco	rporated" or the abbreviation "Corp." or "Inc."
(Principal office address MUST BE A STREET A			***
	-		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i> )	P. O. Box 91	
	_	, FL 34251	
			E . =
D. If any about the second are a second			
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered.</li> </ol>			Florida, enter the name of the
	Greg Poula		. <u>.</u> 2
Name of New Registered Agent:			
	9954 Mizell Rd		
New Registered Office Address:			(Florida street address)
	Myakka Ci	tv	34251
		(City)	, Florida (Zip Code)
		(City)	(zip Code)
New Registered Agent's Signature, if changing l			and the second
I hereby accept the appointment as registered agen	nt. I am fam	itiar with and	a accept the obligations of the position.
	N	ACC.	
~			w Registered Agent, if changing
	Sig	mature of ive	w кеуметей А <b>де</b> ті, іј спапуту

## 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.

Examp X Ch X Re X Ac	ange move	<u>V</u> <u>Mi</u>	hn Doe ike Jones Ily Smith	
Type o	of Action (One)	Title	<u>Name</u>	<u>Addres</u> s
l)	Change	P	Cynthia R Poulain	9954 Mizell Rd
	Add			Myakka City, FL 34251
<u>x</u>	Remove			
2) <u>x</u>	_ Change	Р	Greg Poulain	9954 Mizell Rd
	Add			Myakka City, FL 34251
	Remove			
3)	Change			
	Add			
**********	Remove			
4)	_ Change			
	Add			
	Remove			
5)	_ Change			
	Add			
	Remove			
6)	_ Change		<del></del>	
	Add			
	Remove			

f amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)					
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		06/08/2017	
	this document was signed.	option:	, if other than the
Effe	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this blo- ument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this artment of State's records.	s date will not be listed as the
Adoption of Amendment(s)		( <u>CHECK ONE</u> )	
	The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amer	idment(s)
	There are no members or membadopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) wars.	is/were
	Dated 6/20	0/17	
	Signature		
	have not bee	nan or vice chairman of the board, president or other officer-if d n selected, by an incorporator — if in the hands of a receiver, trus ppointed fiduciary by that fiduciary)	
	Greg Pou	lain	
		(Typed or printed name of person signing)	
	Director		
	<del></del>	(Title of person signing)	<del></del>