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AUG 1 8 2016

C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: East Coast Robbit Rescye, Inc.
DOCUMENT NUMBER: _ N/6 00000 773
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Monica Mitchell (Name of Contact Person)
(Name of Contact Person)
East Coast Rabbit Rescue, Inc. (Firm/Company)
(Firm/ Company)
8540 Egict Lakes Lane
(Address)
W. Palm Beach, FL 33412 (City/State and Zin Code)
(City/ State and Zip Code)
Monica mitchell - Usa d hotmail. com  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
William Mitchell at 561-373-7456  (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee SCertificate of Status Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee SCertificate of Status (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section  Street Address Amendment Section
Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment**

to

Articles of Incorporation of

East Coast Robbit Resc (Name of Corporation as curren	ue Inc.		
(Name of Corporation as curren	tly filed with the Florida Dept. of State)		_
N 16 000000 773			
(Document Numb	er of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts	the follow	ing
A. If amending name, enter the new name of the corporati	ion:		
N/A		The n	eu;
name must be distinguishable and contain the word "corporal "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp	or "Inc	."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	ν/ <u>λ</u>		_
			- 2
		# <u>#6.</u>	_
C. Enter new mailing address, if applicable:	NIA		200
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		- 534	— i
	•		
		<u> 200</u>	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		F S IXI E	ان ن
	N/A		
Name of New Registered Agent:	70 / A		
New Registered Office Address:	(Florida street address)	<u>.</u>	
New Negistered Office Indiress.			
<del></del>	(City), Florida (Zip Code)		<del></del>
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		n.	
	N/A		
Si	ignature 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	<u>V</u> <u>Mik</u>	n <u>Doe</u> e Jones y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add X Remove	<u>S</u>	Yowons Ke, Jenn. Fer	266 SW De Gouven Tellac Port Saint Lucie, FL 34984
2) Change Add	T	Haley, Ron	13731 Ook Ridge Dn Davie, Fl 33325
3) Change AddX Remove	工	Peery, Steve	13731 Oak Ridge Da. Davic, FL 33325
4) Change Add Remove	ST	Mitchell, William	8540 Egict Lakes Ln W. Palm Beach, FL 33412
5) Change Add Remove	<del></del>		
6) Change Add Remove			<del></del>

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
N/A			
··· · · · · · · · · · · · · · · · · ·			
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		<u>.                                    </u>	
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The date of each amendment(s) adoption: _ date this document was signed.	08/02/2016	, if other than the
Effective date if applicable:	18/02/2016	
. (no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of	ot meet the applicable statutory filing requirements, this date wind State's records.	ll not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s	)
There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The amendment(s) was/were	
Dated Signature	09/03/2016	
(B) the chairman or vi- have not been selected	ce chairman of the board, president or other officer-if directors d, by an incorporator – if in the hands of a receiver, trustee, or fiduciary by that fiduciary)	
Monic	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
Presi	dent	
<del></del>	(Title of person signing)	