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FILED
18 MAY 29 PH 3: 07

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: The Florida Sporting Dog Association, IN
DOCUMENT NUMBER: N 16 000 17 324
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Florida Sporting Dog Assoc. (Firm/Company)
69 Spring Lake Dr. Debarg Ft - (Address)
City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rob Bi Hea at 380-956-8805 (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:
□\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certificate of Status  (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment

## FILED

	to	·
	Articles of Incorporation of	18 MAY 29 PM 3: 07
The Florida Spor	. ^ ^	OCIA-187 TEUCESTATE  orida Dept. of State)
N 16000 12324 (Docume	ent Number of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Not I</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	Corporation" or "incorporat	The new ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AD</u>	De: 69 5	pring LAK Dr.
C. Enter new mailing address, if applicable: (Muiling address <u>MAY BE A POST OFFICE B</u>	ox 69 500 Debary	FL 32113
D. If amending the registered agent and/or registonew registered agent and/or the new registered		a, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(	Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		ot the obligations of the position.
	Signature of New Root	Stered 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.

X Change X Remove X Add	PT         John D           V         Mike J           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add	/		
Remove 5) Change			
Add Remove	/		
6) Change Add			
Remove			

tach additional shee	g additional Articles, if necessary).	(Be specific)			
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The date of each amendment(s) adopt	ion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not ment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	
☐ 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 5(2)	1/18	
have not been so	or vice chairman of the board, president or other officer-if directors elected, by an incorporator – if in the hands of a receiver, trustee, or binted fiduciary by that fiduciary)	_
Ros	(Typed or printed name of person signing)	
Vic	(Title of person signing)	