N1700 001 461

(Requ	iestor's Name)	
(Addr	ess)	
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(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doce	ument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Fi	 ling Officer:	

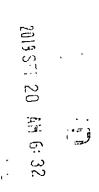
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COVER LETTER

TO: Amendment Section Division of Corporations

Lost Pet Services, Inc.			
N17000001461			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	d for filing.		
Please return all correspondence concerning this matter to t	the following:		
Patricia J. Giarrusso			
(Nat	me of Contact Per	rson)	
Lost Pet Services, Inc.			
	(Firm/ Company)		
6905 29th Ave. W.			
	(Address)		
Bradenton FL 34209			
(City	y/ State and Zip C	lode)	
Patty@941LostPets.com			
E-mail address: (to be used for	future annual repo	ort notification)
For further information concerning this matter, please call:			
Patty Giarrusso	at	941	330-3339
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida D	epartment of S	tate:
(A)	43.75 Filing Fee destricted Copy additional copy is nelosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

Mailing Address

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

Street Address

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

Articles of Amendment to Articles of Incorporation of



2019 SEP 20 AM 6: 32 Lost Pet Services, INc. (Name of Corporation as currently filed with the Florida Dept. of State) N17000001461 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (l-lorida street address) New Registered Office Address: , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature 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 Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	D	Deborah Capobianco	6115 10th Ave W
Add			Bradenton FL 34209
Remove			
2) X Change	VPT	Terry Creamer	8737 Amaretto Avenue
Add			Sarasota FL 34238
Remove			
3)Change	· · · · · · · · · · · · · · · · · · ·		
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or addin (attach additional sheet	s, if necessary).	(Be specific)					
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	te this document was signed. , if other that	in the
Eff	fective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	ite: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cument's effective date on the Department of State's records.	e
Ad	loption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	September 17, 2019 Dated	
	Signature Patria Miarino	
	(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)	
	Patricia J Giarrusso	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	