## N17 00000 9795

(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	ity/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Nam	e)		
(D	ocument Number)			
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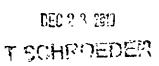
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SECRETARY OF STATE
ALL AHASSEE, FLORIDS



## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	DOGS OF FIRE MO	C, INC.		
		-		
DOCUMENT NUMBER:	17000009795 			
The enclosed Articles of Amer	ndment and fee are subm	itted for filing.		
Please return all corresponden	ce concerning this matter	to the following:		
GLENN JAKALOW				
	(	Name of Contact Po	erson)	
DOFMC, INC TREASUR	ER			
		(Firm/ Company	:)	<del></del>
P.O. BOX 124				
	<del> </del>	(Address)		
MINERAL SPRINGS, NC 2	8108			
	(	City/ State and Zip	Code)	
MOOCH@LETS-RIDE.CA				
E-n	nail address: (to be used	for future annual rep	ort notificatio	n)
For further information concer	ming this matter, please o	eall:		
GLENN JAKALOW		al	(704)	704-989-0859
1)	Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the fol	lowing amount made pay	able to the Florida l	Department of	State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & I Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif (Addi	0 Filing Fee ficate of Status fied Copy fitional Copy is osed)
<u>Mailing Ad</u> Amendment			reet Address nendment 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 of

(Name of Corporation	as current	<u>y filed with t</u>	he Florida Dept.	of State)		
DOGS OF FIRE MC, INC Document # N170	000009795					
(Docum	nent Number	r of Corporati	on (if known)			
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florida</i>	Not For Profit Co	orporation adopts th	ie follo	wing
A. If amending name, enter the new name of the	corporatio	<u>n:</u>				
N/A					The	new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "incor	rporated" or the a	bbreviation "Corp.	" or "L	nc."
D F		N/A				
B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u>				<del></del>	19	
Timeque office unutess BIOST DI. A STREET A	<i>DDK</i> 1233 )			<u> </u>		
	•			7	-¥0V	
				<u></u>	2	
C. Patarana malling address if applicables						,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	ROX)	N/A		:,'≒	<u> </u>	۰ ۱ ۰ مصو
(Manual Care Manual Care Manua	, , , , , , , , , , , , , , , , , , ,					
				22	မ	
				<b>%</b>	ىي	
		<del></del>				
D. If amending the registered agent and/or regis	stered office	address in F	Florida, enter the	name of the		
new registered agent and/or the new register			, , , , , , , , , , , , , , , , , , , ,			
	N/A					
Name of New Registered Agent:						
	N/A					
			(Florida street i	address)		
New Registered Office Address:						
				, Florida		
		(City)		, Plotida (Zip Code)		—
		( =,//		, ,		
New Registered Agent's Signature, if changing I						
I hereby accept the appointment as registered agen	it. Lam fam	iliar with and	l accept the obliga	tions of the position	·.	
-	Sig	mature of Nev	v Registered Agen	t. 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change		N/A	<del></del>	
Add				
Remove				- 35 Z =
2) Change		N/A		
Add				<u> </u>
Remove				<b>ω</b> ω
3) Change		N/A		<del></del>
Add				
Remove				
4) Change		N/A		
Add				
Remove				
5) Change	<del></del>	N/A		
Add				
Remove				
6) Change		N/A		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
AMENDING ARTICLE III	
Said organization is organized exclusively for charitable, religious, educational and scientification of the control of the co	ic purposes.
including, for such purposes, the making of distributions to organizations that qualify as ex-	empt
organizations described under Section 501(c)(3) of the Internal Revenue Code, or correspond	onding section of
any future federal tax code.	
Upon the dissolution of the organization, assets shall be distributed for one or more exemp	ot purposes within
the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section	of any future federal
tax code, or shall be distributed to the federal government, or to a state or local government	nt, for a public
purpose. Any such assets not disposed of shall be disposed of by a court of competent jur	risdiction in the
county in which the principal office of the organization is then located, exclusively for such	purposes or to
such organization or organizations, as said Court shall determine, which are organized and	d operated
exclusively for such purposes.	19 NOV
	ARY SSE
	Mail: 3 DF STATE F 100 III
	<b>%</b>

11-12-2019	
The date of each amendment(s) adoption:late this document was signed.	, if other than the
ade 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 does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the members and the number of votes cast 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.	
Dated	
Signature (By the chairman or vice chairman of the board, president or other officer-if directors	<del></del>
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	F   19 NOV 2
GLENN JAKALOW	
(Typed or printed name of person signing)	्रम् <b>ड</b> ∏
TREASURER	AHII: 33
(Title of person signing)	