N170000 /1273

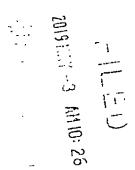
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Thrifty Dog Incorpora	ated		
DOCUMENT NUMBER:	N17000011273			
			. =	
The enclosed Articles of Ar	nendment and fee are subm	utted for filing.		
Please return all correspond	ence concerning this matter	to the following:		
Finance Department				
	(Name of Contact Per	son)	
Animalade Inc.				
	·····	(Firm/ Company)	-	
9017 Commercial Way				
		(Address)		
Weeki Wachee, Fl, 34613				
	(City/ State and Zip C	ode)	
thriftydogg@gmail.com				
	E-mail address: (to be used	for future annual repo	rt notification)
For further information con-	cerning this matter, please o	all:		
Finance Department		at	352	701-1107
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the	following amount made pay	able to the Florida De	epartment of S	State:
☐ \$35 Filing Fee	■\$43.75 Filing Fee & D Certificate of Status	3\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee cate of Status ed Copy cional Copy is sed)
Mailing /	Address	Stre	et Address	

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

Arti	icles of Amendment	
Artic	to cles of Incorporation	20/0.
Alle	of	
Thrifty Dog Incorporated		
(Name of Corporation as curr	ently filed with the Flor	rida Dept. of State)
N17000011273		
(Document Nur	mber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ation:	
Animalade Inc.		The new
name must be distinguishable and contain the word "corpo	ration" or "incorporated	
"Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>3</u>)	
C. Enter new mailing address, if applicable:	NT/ A	
(Mailing address MAY BE A POST OFFICE BOX)	N/A 	
	-	
		
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		enter the name of the
new registered agent and/or the new registered office	<u> z address:</u>	
Name of New Registered Agent:	N_/A	
New Registered Office Address:	(Fi	lorida street address)
The state of the s		
	(City)	, Florida (Zip Code)
	•	(24) Code)
New Registered Agent's Signature, if changing Registered liberally accept the appointment as registered agent. I am	ed Agent:	da sklimim of de seeds
nereas accept the appointment as registered agent. I am	јатиаг wun and accept	the onligations of the position.
	Signature of New Regis	tered Agent, if changing
	commence of their neglin	o o regern, y 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 Add Remove			
2) Change Add		_	
Remove 3) Change Add		_	
Remove 4) Change Add			
Remove 5) Change Add		<u> </u>	
Remove 6) Change Add	***************************************		
Remove			

(attach additional sheets, if necessary). (Be specific)					
Amendment I to be removed and state: "Animalade Inc.".					
Amendment III to be removed and state: "To advocate for animals through community education, collective volunteering,					
and monetary support. To include, but not limited to, rescue organizations, animal shelters, and therapy/service animals.					

The	date of each amendment(N/A	, if other than the
	this document was signed.	y adoption.	, ii other than the
	•	1/29/19	
Effe	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
		s block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	e listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.	
	There are no members or n adopted by the board of di	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
	Dated		
	Signature	thony bail Jella	_
		thairman of vice chairman of the board, president or other officer-if directors to been selected, by an incorporator – if in the hands of a receiver, trustee, or	
		ourt appointed fiduciary by that fiduciary)	
	Anti	ony D. Loffler	
		(Typed or printed name of person signing)	
	Vice	President	
		(Title of person signing)	