## N18000004437

(Requestor's Name)
(Address)
(Address)
(A) (A) (B) (A)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Alley Cats and Desert Dogs Relief Proje
DOCUMENT NUMBER: N 1800000 4437
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)
Alley Cats and Desert Dogs Relief Project, In (Firm/Company)
10571 Hearth Road (Address)
Spring Hill, FC 34608 (City/ State and Zip Code)
Leigh Lomax Cicloud. Com  JE-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Leigh Lomol at 352 428-2116 (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 & S43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status (Additional copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## Articles of Amendment

to
Articles of Incorporation

(Name of Corporation as currently filed with the Florida	pert Dags Relief Project, Inc.
18000004113-	7
(Document Num	ber of Corporation (if known)
·	tes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:
	The new
name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	(1)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered off	fice address in Florida, enter the name of the
new registered agent and/or the new registered office	address:
Name of New Registered Agent:	-9 [
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	d Agent: Amiliar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing

P = President; V = Vice I	if necess rector titl President Chief F	eary) le by the f T= Trea inancial (	first letter of the office title:  surer: S= Secretary: D= Director: TR= T  Officer. If an officer/director holds more t	rustee; C = Chairman or Clerk; CEO = Chief han one title, list the first letter of each office
	ves the c	orporatio	n, Sally Smith is named the V and S. These	e PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Si	ones	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change Add		_		
Remove 2)ChangeAdd				
Remove 3) Remove Add Remove	<del>-</del>	_		
4) Change Add		-		
Remove				
5) Change Add		_		
Remove				<del></del>
6) Change Add		<del></del>		
Remove				<del></del>
(attach additional shee	ets, if nec	essary).		
ARTICLE	- //	_ :	. To provide	rescue support

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name,

	_
	<del></del>
	<del></del>
	<del></del>
	<del></del>
The date of each amendment(s) adoption: April 6, 2021	, if other than the
(h - '/ / ¬ - 0 /	
Effective date if applicable:  (no more than 90 days after amendment file date)	<del> </del>
' (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 not be listed as the

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

v 1,	
	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 4/6/21 Signature Lei A Long
	(By the chairman of 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)
	(Typed or printed name of person signing)
	President (Title of person signing)