

N18000005351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

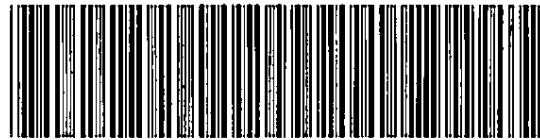
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600334938796

10/01/19--01024--010 **45.75

FILED
19 OCT 31 PM 11:10
S. YOUNG
TALLAHASSEE, FLORIDA

NOV 05 2019

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2019

LISA BOGATIN
BELLA'S PROMISE PET RESCUE INC
7132 AYRSHIRE LANE
BOCA RATON, FL 33496

SUBJECT: BELLA'S PROMISE PET RESCUE INC
Ref. Number: N18000005351

We have received your document for BELLA'S PROMISE PET RESCUE INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

PAGE 4 IS NOT AN NOT FOR PROFIT PAGE

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 819A00021508

57-11-17 18 1006102

RECEIVED

www.sunbiz.org

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Bella's Promise Pet Rescue

DOCUMENT NUMBER: N 18000005351

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Bogatin
Name of Contact Person

Bella's Promise Pet Rescue
Firm/ Company

7132 Ayreshire Lane
Address

Boca Raton, FL 33496
City/ State and Zip Code

LISADB923@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Bogatin at (845) 641-5293
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:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|--|--|--|--|

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

Bella's Promise Pet Rescue

(Name of Corporation as currently filed with the Florida Dept. of State)

N 18000005351

(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:

N/A - Same Name

The new 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**)

N/A Same Address

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

N/A - Same mailing
Address

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:

Lisa Bogatin

(Same as
principal office)

7132 Ayshire Lane

(Florida street address)

New Registered Office Address:

Boca Raton

(City)

Florida 33496

(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]
Signature of New Registered Agent, if changing

FILED
19 OCT 31 PM 11:10
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Robert Perez</u>	<u>574 Dolphin Dr.</u> <u>Delray Beach, FL</u> <u>33445</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P, T</u>	<u>Lisa Bogatin</u>	<u>7132 Ayrshire Lane</u> <u>Boca Raton, FL</u> <u>33496</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Kim Woollett</u>	<u>3451 Taconic Drive</u> <u>West Palm Beach, FL</u> <u>33406</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Ana Castro</u>	<u>10389 Pippin Ln</u> <u>Royal Palm Beach</u> <u>33411 FL</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Same	<u>VP</u>	<u>Yrsenia Perez</u>	<u>574 Dolphin Dr.</u> <u>Delray Beach FL</u> <u>33445</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: 8/12/19, if other than the date this document was signed.

Effective date if applicable: 8/12/19
(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 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.
- ☐ 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 10/30/19

Signature [Signature]
(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)

LISA BOGATIN
(Typed or printed name of person signing)

President
(Title of person signing)