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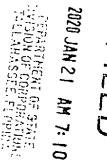
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	et Project Inc		
N18000005686 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	ibmitted for filing.	-	
Please return all correspondence concerning this ma	atter to the following:		
Rhonda Eldridge			
	(Name of Contact	Person)	
The Community Pet Project Inc			
	(Firm/ Compa	ny)	
3513 King George Lane			
	(Address)		
Seffner, FL 33584			
	(City/ State and Zi	p Code)	<u> </u>
communitypetproject@yahoo.com			
E-mail address: (to be use	ed for future annual r	eport notificatio	n)
For further information concerning this matter, pleas	se call:		
Rhonda Eldridge	a	813 u	530-6722
(Name of Contact Perso		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida	Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fed Certified Copy (Additional copy enclosed)	Certifi is Certifi	D Filing Fee icate of Status ied Copy tional Copy is sed)
Mailing Address Amendment Section	_	treet Address	

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

The Community Pet Project Inc (Name of Corporation as currently filed with the Florida Dept. of State) N18000005686 (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 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. n/a 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: (Florida street address) New Registered Office Address: , Florida (Zip Code) (Citv) 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change Add	T	_	Rebekah Williams	1709 Southwind Drive Brandon, FL 33511
× Remove				
2) Change Add	<u>S</u>	_	A J Faryniasz	11427 Village Brook Dr Riverview, FL 33579
X Remove 3) Change Add Remove	<u>v</u>		Kimberely Ferrell	9924 Azalca Bloom Way #504 Riverview, FL 33578
4) Change Add	T		Jami George	1717 Erin Brooke Dr Valrico, FL 33594
Remove 5) Change	<u>s</u>	_	Lios Villarreal	403 6th Ave SW Ruskin, FL 33570
6) Change Add	D		Allison Duncan	4016 Bell Grande Dr Valrico, FL 33596
E. If amending or additional sheet			Page 2 of 4 icles, enter change(s) here: (Be specific)	
Article III				
We assist the pets of the	homeless	and at ris	sk in Hillsborough County FL by providing t	ne basic items up to and including
		-	entative, medical refferals and medical co-particle pets and the benefits of altering pets.	ys when available. We educate the

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	Page 3 of 4	
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The date of each amendment(January 15, 2020	
the date of each amendment(s) adoption:	if other than the
date this document was signed.		
Effective date if applicable:	January 15, 2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be e Department of State's records.	listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.	

Dated	January 15, 2020
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)
	Rhonda Eldridge (Typed or printed name of person signing)
	President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.