

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:	Division of Co	orporations		·	: '
	Fax Number	: (850) 617-6	380		2
From:				•	
	Account Name Account Number				-
	Phone	: (323)962-8	600		
	Fax Number	: (323)962-3	889		
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## COVER LETTER

TO:	Amendment Section
	Division of Corporations

NAME OF CORPORATION: NATURE COAST 1	TURTLE AND TORTOR	SE RESCUE SANCTUARY, INC
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are subm	nuted for filing	
Please return all correspondence concerning this matte	r to the following	
Cheye	enne Moseley	
	(Name of Contact Persor	1)
Legalz	com com, Inc	
	(Firm/ Company)	
101 N Bran	nd Blvd , 11th Floor	
	(Address)	
Glenda	ale, CA 91203	
	(City/ State and Zip Code	2)
tortsanctuary@gmail.com		✓
la-mail address (to be used	for future annual report i	notification)
For further information concerning this matter, please	call	
Cheyenne Moseley	800 at (	773-0888 ext 9724
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Depa	riment of State
S35 Filing Fee S43 75 Filing Fee & Certificate of Status	\$43 75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$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	Amend Divisio Clifton 2661 E	Address ment Section it of Corporations Building xecutive Center Circle issee, FL 32301

2019-02-11 07.06:48 PST

	Articles of	Incorporation of		
NATURE COAST TURTLE AND TORYO	ISE RESCUE SA	INCTUARY, INC.		
(Name of Corporation as currently fil	led with the Florid	a Dept. of State)		
N19000000807				
(Document)	nt Number of Corpo	oration (if known)		
Pursuant to the provisions of section 617 1006 amendment(s) to its Articles of Incorporation	5, Florida Statutes, t	his <i>Florida Not Fur Pro</i> j	fit Corporation adop	is the following
A. If amending name, enter the new name	of the corporation:	Ŀ		
		***************************************		The new
name must be distinguishable and contain the "Company" or "Co." may not be used in the		n" or "incorporated" or	the abbreviation "Co	rp " or "Inc "
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE				<del>-</del>
	•			
C. Francisco - William Indonesia Compilar his	 L			Gy I
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF				
	_			
			<del>-</del>	
D. If amending the registered agent and/or new registered agent and/or the new ret			the name of the	
Name of New Registered Agent	•			
Addition of the property of the second				
	(Fle	orida street address)	-	
New Registered Office Address				
			, Florida	
	(City)		(Zsp	Code)
New Registered Agent's Signature, if change	zing Registered Ag	ent:		
I hereby accept the appointment as registered	lagent Lam famili	iar with and accept the o	hligations of the posi	lion
Si Si	ignature of New Res	gistered Agent, if changi	<u></u>	
~-	J	. IF 1117 3 11 1111 CH 11		

Page 1 of 4

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 = Trusice, C = Chairman or Clerk, CEO = ChiefExecutive Officer, CFO = Chief Financial Officer of 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

X Change X Remove X Add	Y Mike	Dog 2 Jones 2 Smith	
Type of Action (Check One)	Tule	<u>Nume</u>	<u>Addres</u> s
1) Change	PD	Joyce M Decker	7595 WEST TAFFETA LN
Add			DUNNELLON, FL 34433
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			
Remove			
ර) Change	<del></del>		
Add			
Remove		n	

Page 2 of 4

If amending or adding additional Art attach additional sheets, if necessary)	(Be specific)

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The date of each amendme		if other than the
date this document was sign	ପ୍ର	
Effective date if applicable	;	_
	(,,,,,,,,	
Adoption of Amendment(s	) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was was/were sufficient for	/were adopted by the members and the number of votes cast for the amendment(s) approval	
There are no members adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were if directors	
Dated	2-4-2019	
Signature	Sourcem. Deaber	
	the chairman or vice chairman of the board, president or other officer-if directors and bean selected, by an incorporator — if in the hands of a receiver, trustee, or	
	er court appointed fiduciary by that fiduciary)	
Joyce M	Decker	
•••	(Typed or printed name of person signing)	
Presider	ıt	
	(Title of person signing)	