## N19 0000002342

(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:





500348788485

RECEIVED
JUL 2 1 2020

07/24/20--01030 -029 \*\*43.75

2020 21 F3 4: 04

R. 1 VH. TE. SEP 0 : 2020

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: PAWS FOR	PUTNAM INC			
N19000002342  DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee	are submitted for fili	ng.		
Please return all correspondence concerning the		-		
r lease return an correspondence concerning in	is matter to the folio	wing.		
REBECCA A CUMMINS				
	(Name of Co	ontact Person)		
PAWS FOR PUTNAM INC				
	(Firm/ C	Company)		
4880 FROST LAKE DRIVE				
	(Add	iress)		
JACKSONVILLE, FL 32258				
	(City/ State a	and Zip Code)		
beckycummins526@comcast.net				
E-mail address: (to	be used for future an	inual report notificat	ion)	
For further information concerning this matter	, please call:			
REBECCA A CUMMINS		904 at	803-5488	
(Name of Contact	: Person)		) (Daytime Telephone Num	ber)
Enclosed is a check for the following amount	made payable to the	Florida Department	of State:	
□ \$35 Filing Fee □ \$43.75 Filing Certificate of		Copy Cer Il copy is Cer (Ad	.50 Filing Fee tificate of Status tified Copy ditional Copy is closed)	
Mailing Address		Street Address	i	

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

2078. 21 Fil 4: 04

(Name of Corporation as currently filed with the	Florida Dept. of State)	
PAWS FOR PUTNAM INC		
(Docum	ent Number of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
N/A		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applical	N/A	
(Principal office address <u>MUST BE A STREET A</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE L	8 <i>0X</i> ) N/A	
<ul> <li>If amending the registered agent and/or registered agent and/or the new registered.</li> </ul>		enter the name of the
	N/A	
Name of New Registered Agent:		
•		
New Registered Office Address:	( <i>f</i> i	orida street address)
	N/A	. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing R	egistered Agent:	
I hereby accept the appointment as registered agent	. I am familiar with and accept	the obligations of the position.
_	6.1	
	Signature of New Registe	ered 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)	Title	Name	<u>Addres</u> s	
1) Change Add		N/A		
Remove				
2) Change Add		<u>N/A</u>		
Remove 3) Remove — Add Remove	<del></del>	<u>N/A</u>		
4) Change Add		<u>N/A</u>		
Remove				
5) Change Add		<u>N/A</u>		
Remove				
6) Change Add		<u>N/A</u>		
Remove				
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
ARTICLE III - PURPOS	E	· · · · · · · · · · · · · · · · · · ·		
Paws for Putnam is organ	ized excl	usively for charitable, religious, educational, and scien	itific purposes, including, for such	
purposes, the making of distributions to organizations that qualify as exempt organizations described under Section 501(c)(3)				
of the Internal Revenue Code, or corresponding section of any future federal tax code.				
ARTICLE IV - NON-PROFIT NATURE, 4.03 Dissolution.				

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning			
of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be			
distributed to the federal government, or to a state or local government, for a public purpose.			
The date of each amendment(s) adoption:, if other than date this document was signed.			
Effective date if applicable:  (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 7/6/2020
Signature Middle All Lowell
(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)
MICHELLE M. MERRELL
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)