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Amend

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# **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	COMPANION CARE	E FUND CORPO	ORATION		
NI DOCUMENT NUMBER:	9000005813				
The enclosed Articles of Amen	dment and fee are subn	nitted for filing.			
Please return all correspondenc	e concerning this matter	r to the following	· ·		
MELISSA MAY					
		(Name of Contac	et Person)		
MARATHON VETERINARY	HOSPITAL				
<del></del>		(Firm/ Comp	pany)	<del></del>	
5001 OVERSEAS HIGHWAY	,				
<u> </u>		(Address	s)		
MARATHON, FL 33050					
	1	(City/ State and 7	Zip Code)		
INFO@MARATHONVET.CO	ЭМ				
E-m	ail address: (to be used	for future annua	report no	otification	i)
For further information concern	ning this matter, please o	call:			
MELISSA MAY			305 _at		743-7099
(N	ame of Contact Person)			a Code)	(Daytime Telephone Number)
Enclosed is a check for the foll	owing amount made pay	able to the Flori	da Depar	ment of S	State:
■ \$35 Filing Fee 【	S43.75 Filing Fee & ( Certificate of Status	S43.75 Filing Certified Copy (Additional co enclosed)	,	Certifi Certifi	O Filing Fee cate of Status ed Copy is sed)
Mailing Add			Street A	ddress	on

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# Articles of Amendment to Articles of Incorporation of

# COMPANION CARE FUND CORPORATION

.., 1...

(Name of Corporation as cu	rrently filed with the Flo	rida Dept, of State)	
N19000005813			
(Document N	lumber of Corporation (if l	(nown)	
Pursuant to the provisions of section 617.1006, Florida St amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not Fo	or Profit Corporation adopts the follow	wing
A. If amending name, enter the new name of the corporate	oration:		
		<i>The</i>	new
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporate	d" or the abbreviation "Corp." or "h	ıc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>		_
		77.5	
		SEGRET TALL MIL	<del>-</del> n
C. Enter new mailing address, if applicable:		N ON I	
(Mailing address MAY BE A POST OFFICE BOX)			ı
D. If amending the registered agent and/or registered	office address in Florida	enter the name of the	<b>&gt;</b>
new registered agent and/or the new registered off		ther the name of the	
Name of New Registered Agent:			
	(F	lorida strect address)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registon I hereby accept the appointment as registered agent. I as		t the obligations of the position.	
	Sivnature of New Revis	tered 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)

٠.,

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	PT         John D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>v</u>	Meghanne Petty	12222 Overseas Highway
Add			Marathon, FL 33050
X Remove			
2) Change	V	Douglas Mader, DVM	1343 Long Beach Road
X Add			Big Pine Key, FL 33043
Remove			
3)Change			<u></u>
Add			
Remove			
4) Change			
Add			
Remove			
5) (1)			
5) Change			
Add Remove			
Kemove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)
Please see attached articles that have been re	viewed and updated.
· · · · · · · · · · · · · · · · · · ·	

#### COMPANION CARE FUND CORPORATION

#### ARTICLE I, NAME

## 1.01 Name

The name of this corporation shall be COMPANION CARE FUND CORPORATION.

# ARTICLE II, DURATION

## 2.01 Duration

The period of duration of the corporation is perpetual.

# ARTICLE III, PURPOSE

# 3.01 Purpose

COMPANION CARE FUND CORPORATION is a non-profit corporation and shall operate exclusively for educational and charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future Federal tax code. COMPANION CARE FUND CORPORATION's purpose is to provide the support of animals in need of veterinary care when owners are facing financial hardship due to natural disasters or unemployment.

## 3.02 Public Benefit

COMPANION CARE FUND CORPORATION is designated as a public benefit corporation.

# ARTICLE IV, NONPROFIT NATURE

#### 4.01 Non-Profit Nature

COMPANION CARE FUND CORPORATION is organized exclusively for charitable and educational purposes including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code. No part of the net earnings of COMPANION CARE FUND CORPORATION shall inure to the benefit of, or be distributable to its members, trustees, officers or other private persons except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof.

Notwithstanding any other provision of this document, the corporation shall not carry on any other activities not permitted to be carried on (a) by any organization exempt from federal income tax under section 501(c)(3) of

the Internal Revenue Code, corresponding section of any future federal tax code, or (b) by any organization, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or corresponding section of any future federal tax code.

COMPANION CARE FUND CORPORATION is not organized and shall not be operated for the private gain of any person. The property of the corporation is irrevocably dedicated to its educational and charitable purposes. No part of the assets, receipts, or net earnings of the corporation shall inure to the benefit of or be distributed to any individual. The corporation may, however, pay reasonable compensation for services rendered, and make other payments and distributions consistent with these articles.

## 4.02 Personal Liability

No officer or director of this corporation shall be personally liable for debts or obligations of COMPANION CARE FUND CORPORATION of any nature whatsoever, nor shall any of the property or assets of the officers or directors be subject to the payment of the debts or obligations.

## 4.03 Dissolution

Upon termination or dissolution of the COMPANION CARE FUND CORPORATION, any assets lawfully available for distribution shall be distributed to one (1) or more qualifying organizations described in Section 501(c)(3) of the Internal Revenue Code of 1986 (or described in any corresponding provision of any successor statute) which organization or organizations have a charitable purpose which, at least generally, includes a purpose similar to the terminating or dissolving corporation.

The organization to receive the assets of the COMPANION CARE FUND CORPORATION hereunder shall be selected by the discretion of a majority of the managing body of the COMPANION CARE FUND CORPORATION and if its members cannot so agree, then the recipient organization shall be selected pursuant to a verified petition in equity filed in a court of proper jurisdiction against the COMPANION CARE FUND CORPORATION by one (1) or more of its managing body which verified petition shall contain such statements as reasonably indicate the applicability of this section. The court upon a finding that this section is applicable shall select the qualifying organization or organizations located within the State of Florida.

In the event that the court shall find that this section is applicable but that there is no qualifying organization known to it which has a charitable purpose, which, at least generally, includes a purpose similar to this corporation, then the court shall direct the distribution of its assets lawfully available for distribution to the Treasurer of the State of Florida to be added to the general fund.

#### 4.04 Restricted Activities

No substantial part of the corporation's activities shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene (including the publishing or distribution of statements) in any political campaign on behalf of or in opposition to any candidate for public office.

#### 4.05 Prohibited Activities

Notwithstanding any other provision of the Articles, the corporation shall not carry on any activities not permitted to be carried on (1) by a corporation exempt from federal income tax as an organization described by

Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (II) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or corresponding section of any future federal tax code.

# ARTICLE V, BOARD OF DIRECTORS

## 5.01 Governance

COMPANION CARE FUND CORPORATION shall be governed by its board of directors.

# 5.02 Initial Directors

The initial directors of the corporation shall be Melissa May, Douglas Mader, DVM and Marathon Veterinary Hospital.

# ARTICLE VI, MEMBERSHIP

# 6.01 Membership

COMPANION CARE FUND CORPORATION shall have no members. The management of the affairs of the corporation shall be vested in a board of directors, as defined in the corporation's bylaws.

#### ARTICLE VII, AMENDMENTS

#### 7.01 Amendments

Any amendment to the Articles of Incorporation may be adopted by approval of two-thirds (2/3) of the board of directors.

# ARTICLE VIII, ADDRESSES OF THE CORPORATION

# 8.01 Corporate Address

The physical address of the corporation is:

5001 Overseas Highway Marathon, FL 33050

The mailing address of the corporation is:

5001 Overseas Highway Marathon, FL 33050

# ARTICLE IX, APPOINTMENT OF REGISTERED AGENT

# 9.01 Registered Agent

The registered agent of the corporation shall be:

Geraldine Diethelm-Mader, DVM 1343 Long Beach Road Big Pine Key, FL 33043

## ARTICLE X, INCORPORATOR

The incorporators of the corporation are as follow:

Geraldine Diethelm-Mader, DVM 1343 Long Beach Road Big Pine Key, FL 33043

We, the undersigned, do hereby certify that the above stated Articles of Incorporation of COMPANION CARE FUND CORPORATION were approved by the board of directors on August 24<sup>th</sup>, 2019 and constitute a complete copy of Articles of Incorporation of the COMPANION CARE FUND CORPORATION.

Melissa May – P 9 Sombrero Blvd Unit 101 Marathon, FL 33050

Douglas Mader, DVM – V 1343 Long Beach Road Big Pine Key, FL

Marathon Veterinary Hospital – O 5001 Overseas Highway Marathon, FL 33050

Date: 9-29-19

# Acknowledgment of consent to appointment as registered agent

I. Camblina Distrator	Made DVM and the banks of the state of the COMPANION CART FUN	
1, Geraidine Dietneim-	Mader, DVM, agree to be the registered agent for the COMPANION CARE FU?	ND
CORPORATION as a		
	6. Q.M	
Registered Agent:	6! XX	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the members and the number of votes east for the amendment was/were sufficient for approval.	nt(s)
☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/wer adopted by the board of directors.	re
9/27/2019 Dated	
SignatureMelison May	
(By the chairman or vice chairman of the board president or other officer-if directed have not been selected, by an incorporator — if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	
Melissa May	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	_

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