## N900000 8498

(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



700348682437

07/27/20--01072--017 ++35.00

RECENTED
JUL 2 4 2020

2020." 1: 3: 28

Mama Chy

SEP 18 2020 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT		OL ZEMMEL FUND	FOR THE HU	JMAN ANIMAL CONNECTION, II
DOCUMENT NUMBER	N19000008498			
The enclosed Articles of A	•	bmitted for filing.		
Please return all correspond	dence concerning this mat	tter to the following:		
Seth Z. Joseph				
		(Name of Contact P	erson)	
Seth Z. Joseph, P.A.				
		(Firm/ Compan	y)	
255 Alhambra Circle, Suite	e 600			
	· <del>-</del>	(Address)		
Coral Gables, FL 33134				
		(City/ State and Zip	Code)	
sjoseph@josephlawfirm.co	m			
	E-mail address: (to be use	d for future annual rep	ort notificatio	n)
For further information con	cerning this matter, please	e call:		
Seth Z. Joseph		at	305	445-5383
<u> </u>	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida l	Department of	State:
	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A	Address	Str	eet 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

Mark and Carol Zemmel Fund for the Human Animal Connection, Inc.

(Name of Corporation as currently filed with the Florida I	Dept. of State)	
N19000008498		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the	following
A. If amending name, enter the new name of the corporat	ion:	
Mark and Carol Zemmel Fund for the Human/Animal Connection	etion, Inc.	The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." (	or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	)	
		)20Z
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		· 1
		- <sup></sup> '
		<u>:۔:</u> در،
D. If amending the registered agent and/or registered offi		FH 3: 28
new registered agent and/or the new registered office a	address:	ىن
Name of New Registered Agent: N/A		<del></del>
New Registered Office Address:	(Florida street address)	
N/A	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		
	ignature 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>	<u>Addres</u> s
1) Change Add		<u>N/A</u>	
Remove			
2) Change Add			
Remove 3) Change			
Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet)		nal Articles, enter change(s) here: ssary). (Be specific)	
N/A			
			<u>-</u>
·······	<del></del>	· · · · · · · · · · · · · · · · · · ·	

<u> </u>				<del></del>
			<u> </u>	
	******			
		<u> </u>		<del> </del>
	·	· · · · · · · · · · · · · · · · · · ·		
		<u> </u>		
		_		
			<del></del>	<del></del>
			<del> </del>	<del></del>
		<u>,</u>		<del></del>
				<del></del>
		<u> </u>	<u> </u>	
		<u> </u>		
		<del></del> .		<del></del>
				<del></del>
			<u>.                                    </u>	<del>-</del>
				:6 a a a
The date of each amendment(s) adoptions date this document was signed.	:	<del></del>	<del></del>	, if other than the
date this document was signed.				
Effective date if applicable:	no more than 90 days aft			
(1	no more than 90 days aft	er amendment file date)		
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable at of State's records.	statutory filing requireme	nts, this date will not	be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted by was/were sufficient for approval.	by the members and the r	number of votes cast for th	ne amendment(s)	

Dated  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)	
Carol Zemmel	
(Typed or printed name of person signing)	
Director/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.