N19000 10861

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Horses and Hounds	enimal.	rescue, Inc.
N19000010861			
DOCUMENT NUMBER:			<u></u>
The enclosed Articles of Amendment and fee are subn	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
Valerie Jones			
	(Name of Contact Pe	rson)	
	(Firm/ Company		
P O Box 740171		,	
	(Address)		
	(Address)		
Orange City, FL 32774			
	(City/ State and Zip C	Code)	
jvbchh1919@aol.com			
E-mail address: (to be used	for future annual repo	ort notification)
For further information concerning this matter, please of	call:		
Valerie Jones	at.	386	337-4003
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	yable to the Florida D	epartment of S	State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee scate of Status ed Copy sional Copy is sed)
Mailing Address		eet Address	
Amendment Section		endment Secti	
Division of Cornorations	1)11	ision of Co rn o	EULORS

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

Homeward Bound Horses and Hounds Animal Rescue, Inc.

(Name of Corporation as curren	ntly filed with the Flor	ida Dept. of State)	
N19000010861			_
(Document Numb	per of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	r Profit Corporation adopts the	: following
A. If amending name, enter the new name of the corporat	tion:		
			The new
name must be distinguishable and contain the word "corpora" "Company" or "Co." may not be used in the name.	ttion" or "incorporated	I" or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS))		
			2019 80
2. Passa and and the address of applicables		-	7.07
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	•		- 2
			777
		<u>:</u>	5
		543	<u>သ</u> ဟ
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(FI	orida street address)	
		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept	the obligations of the position.	
S	Signature of New Regist	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)

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.

Type of Action (Check One)	Example: X Change X Remove X Add	<u>V</u> <u>N</u>	ohn Doe 1ike Jones ally Smith	
Change Wellington, FL 33414		Title	<u>Name</u>	Address
X Add Remove	1) Change	D	Lois Weinstein	13764 Barberry Drive
2) Change Add	V			Wellington, FL 33414
Add Remove 3) Change Add Remove 4) Change Add Remove 5) Change Add Remove 6) Change Add				
Remove	2) Change			
3) Change Add	Add			
Add Remove 4) Change Add Remove 5) Change Add Remove 6) Change Add Add	Remove			Address of the second of the s
Remove	3) Change			
4) Change	Add			
Add	Remove			
Remove	4) Change			
5) Change	Add			,
Add	Remove			
Remove	5) Change			
6) Change	Add			
Add	Remove			
Add	(i) Change			

E. If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)

The	e date of each amendment	(s) adoption:	_, if other than th
date	e this document was signed.		
Eff	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
		is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	e listed as the
Add	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
	There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	11/18 Dated	/2019	
	Signature	ano Director	_
	(By the have n	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Val	lerie Jones	
		(Typed or printed name of person signing)	
	Pre	esident	
		(Title of person signing)	