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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: HOMEWAY	rd Bound +	lorses	and Hounds Ar	<u> </u>
DOCUMENT NUMBER: N19000	10861			
The enclosed Articles of Amendment and fee are sul	bmitted for filing.			
Please return all correspondence concerning this man	tter to the following:			
Valene Jones				
radio odiica	(Name of Contact Pe	rson)		
	(F: /C	<u>, </u>		
	(Firm/ Company)		
P.O. BOX 740171				
	(Address)			
Orange City, FL 327	74			
	(City/ State and Zip (Code)		,
JVbchh1919@all. am E-mail address: (to be use	ed for future annual rep	ort notificatio	1)	
For further information concerning this matter, pleas				
Valence Jones (Name of Contact Perso	at	386	387 - 4003	
(Name of Contact Perso	n)	(Area Code)	(Daytime Telephone Number	.)
Enclosed is a check for the following amount made p		Department of	State:	
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section		eet Address endment Sect	ion	
Division of Corporations		ision of Corpo		
P.O. Box 6327		e Centre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

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HOMEWARD BOUND HO	IRSES AND HOUNDS AF	NIMAL RESCUE, INC.	2020 917 12
(Name of Corporation as currently filed with the Flori	da Dept. of State)		
N 19 000010861			
(Document N	umber of Corporation (if)	known)	
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not F	or Profit Corporation ad	opts the following
A. If amending name, enter the new name of the corp	oration:		
			The new
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	ooration" or "incorporate	d" or the abbreviation "	Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)		
			,,,,,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		, enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:		Torida street address)	
		, Florida	
	(City)	(Zip C	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I am		t the obligations of the po	osition.

Signature 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 D Mike J Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
I) Change Add	<u>S</u>	_	Jack Jones	306 W. Fern Drive Orange City, Fl. 3276
X Remove				
2) Change Add		_		
Remove 3) Remove Add Remove		_		
4) Change Add		_		
Remove				
5) Change Add		_		
Remove				
6) Change Add		_		
Remove				
E. If amending or addir (attach additional shee			icles, enter change(s) here: (Be specific)	
				-
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				 -
	* *			
				
				
				
				· · · · ·
		-		
The date of each amendment(s) addate this document was signed.	loption:			, if other than the
Effective date if applicable:	(no more than 90 d			
<u>Note:</u> If the date inserted in this blo document's effective date on the De			requirements, this date w	ill 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 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 382020
	Signature Valinta Qua
	(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)
	Valene Jones
	(Typed or printed name of person signing)
	President

(Title of person signing)