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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 10) Paws and Claws Inc

DOCUMENT NUMBER: NZDOCOO 100 50

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:



(Name of Contact Person) at <u>386</u> (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

X \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy

J\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> 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

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2211 - 29 M 5:58

(Name of Corporation as currently filed with the Florida Dept. of State)
101 Pais and Cruss Inc. N2000010050 (Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the follow amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The The
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "In "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent: () [[-]
(Florida street address) New Registered Office Address;
\cap $ A$. Florida
(City) (Zip Code)
<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
0 IA
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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John D</u> V <u>Mike Jo</u> SV <u>Sally S</u>	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change _X_ Add	ò	Margan Hurding	17755 Meredith Ave Deltors, EL 32938
Remove			
2) Change Add			
3) Remove 3) Change Add Remove			
4) Change Add			. <u> </u>
Remove			
5/ Change Add			
Remove			
の Change Add			
Remove			
E. <u>If amending or addin</u> (attach additional shee		icles, enter change(s) here: (Be specific)	
NA			
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<u>_,</u> ,
<u>.</u>

The date of each amendment(s) adoption:	, if other the	an the
date this document was signed.		

Effective date if applicable: 912312020 (no more than 90 days after amendment file date)

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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.

• 12 There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Acir

9/23/2070 Dated

Signature Maion

(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)

MECICION Harding (Typed or printed)name of person signing) Pressident (Title of person signing)