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(Ci	ty/State/Zip/Phone	e #)
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A. RAMSEY MAR -7.2024

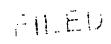
COVER LETTER

TO: Amendment Section Division of Corporations

Roxy's Raccoon NAME OF CORPORATION:	Rehabilitation and Rescue, Inc.
N23000001366	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
JANIS TEDDER-PRATHER	
	(Name of Contact Person)
ROXY'S RACCOON REHABILITATION AND	RESCUE
	(Firm/ Company)
4798 ROBIN DRIVE	
	(Address)
ST CLOUD FL 34772	
	(City/ State and Zip Code)
JATEDD57@YAHOO.COM	
E-mail address: (to be t	used for future annual report notification)
For further information concerning this matter, ple	
JANIS TEDDER-PRATHER	at
(Name of Contact Per	son) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of State	
Mailing Address Amendment Section	Street Address Amendment Section

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



2024 FEB 21 AM 8: 35

(Name of Corporation as currently filed with the Flo ROXY'S RACCOON REHABILITATION AND RES		
(Document	Number of Corporation (if known	wn)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For I	Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:	
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated"	The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	X)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		nter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Flori	da street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent. I		e obligations of the position.
	Signature of New Registers	rd 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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add			
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 addin (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	
ARTICLE X ARTICL	ES OF D	ISSOLUTION	
Upon the dissolution/term	nination/v	winding up of the corporation, assets shall be distribute	ed for one of more exempt purposes
within the meaning of sec	tion 501((e)(3) of the Internal Revenue Code, or the correspond	ing section of any future federal tax
code, or shall be distribut	ed to the	federal government, or to state or local government, f	or a public purpose. Any such assets
not so disposed of shall b	e dispose	ed of by a Court of Competent Jurisdication of the cour	nty in which the prinicipal office of

the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall	
determine, which are organized and operated exclusively for such purposes.	**************************************
	··-
	·
The date of each amendment(s) adoption: fEBRUARY 14, 2024 date this document was signed.	, if other than the
FEBRUARY 14, 2024. Effective date if applicable:	
tno more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	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 membadopted by the boa	pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.
	Dated	FEBRUARY 14, 20 2 4
	Signature	JA10
	(By the chairman or vee 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)
		JANIS TEDDER-PRATHER
		(Typed or printed name of person signing)
		PRESIDENT
		(Title of person signing)