## NA3000003545

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	Florida Animal Pro	exection Foundation I	NC	
DOCUMENT NUMBER	N23000003545			
The enclosed Articles of A	mendment and fee are su	bmitted for filing.		
Please return all correspon	dence concerning this ma	tter to the following:		
Darcy Andrade				
		(Name of Contact I	Person)	
Florida Animal Control As	sociaiton			
		(Firm/ Compar	ıy)	
15275 Collier Blvd #201-1	14			
		(Address)		
Naples, FL 34119				
		(City/ State and Zip	Code)	
info@floridaanimalcontrol	•			
	E-mail address: (to be use	d for future annual re	port notification	n)
For further information con	cerning this matter, please	call:		
Darcy Andrade		at	360	513-8896
	(Name of Contact Person	1)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida	Department of	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

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

	VI			
FLORID	A ANIMAL PROTECTION FOUN	DATION INC.	2023 NOV 27	FH 12: 30
Name of Corporation as currently filed with the	ne Florida Dept. of State)		- <u>-</u> .	_
	N23000003545			• -
(Docu	ment Number of Corporation (if kno	wn)		••
Pursuant to the provisions of section 617,4006, Flumendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For	Profit Corporation	adopts the follow	ing
A. If amending name, enter the new name of the	ne corporation:			
			The n	r'16'
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nan	d "corporation" or "incorporated" ne.	or the abbreviatio	n "Corp." or "Inc	
<del></del>	_			
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET).	able: ADDRESS)			
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BOX)			
				_
	<del></del>			
				_
D. If amending the registered agent and/or reg	stered office address in Florida, er	iter the name of t	<u>he</u>	
new registered agent and/or the new registe				
Name of New Registered Agent:	Darcy Andrade		·	_
	534 25th Street NW			
New Registered Office Address	(Floric	do street address)		<del></del>
Ses registered Office Address	Naples		2.1.20	
	(Circ)		la 34120	_
	e ny	(21)	(Code)	
lew Registered Agent's Signature, if changing l	Registered Agent:			
hereby accept the appointment as registered agen	ii. I am Jamitiar with and accept the	obligations of the	position.	
	Dod			

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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change _XAdd	ED	Darcy Andrade	534 25th Street NW Naples, FL 34120
Remove 2) Change Add			
Remove 3) Change Add Remove			
4) Change Add	<u></u>		
Remove  5) Change Add			
Remove 6) Change Add	· · · · · · · · · · · · · · · · · · ·		
E. If amending or addin (attach additional shee	ig additional Arti ls, if necessary).	cles, enter change(s) here: (Be specific)	
<del> </del>			

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he date of each amendment(s) adoption.		
ate this document was signed.		if other than the
Chapting days 10 Its at 1		
ffective date <u>if applicable</u> :  (no more tha	m 90 days after amendment file date)	
ote: If the date inserted in this block does not meet th	ne applicable statutory filing requirements, this date will	not be listed as the
ocument's effective date on the Department of State's	records.	
doption of Amendment(s) (CHECK C	<u>DNE</u> )	
The amendment(s) was/were adopted by the memb was/were sufficient for approval.	pers and the number of votes cast for the amendment(s)	

.

		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 10/10/2023
		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)
		John Robinson
		(Typed or printed name of person signing)
		President
		(Title of person signing)

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