N24000000357

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATI	Roots N Boots Acre	s Inc			
	N2400000357				
DOCUMENT NUMBER:					
The enclosed Articles of Ar	mendment and fee are sub	mitted for filing.			
Please return all correspond	lence concerning this matt	er to the following:			
Sarah Jones					
 		(Name of Contact P	erson)		
Roots N Boots Acres Inc					
		(Firm/ Company	y)		,
16736 Powerline Rd.					
		(Address)			
Dade City Fl 33523					
		(City/ State and Zip	Code)		
floridafarmschool@gmail.c	com				
	E-mail address: (to be used	for future annual re	port notification	n)	
For further information con	cerning this matter, please	call:			
Sarah Jones		+"·	727	460-1424	
	(Name of Contact Person		(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)	Certif is Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)	
		0.			

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

4	to Articles of Incorporation	\$12°
F	of	· <u></u>
		<u> </u>
(Name of Corporation as currently filed with the Flo	orida Dent. of State)	
Roots N Boots Acres Inc	or or other	
	North and Comment of Comment	
(Document	Number of Corporation (if kn	5wn) :::
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
Florida Farm School & Animal Rescue Inc		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		enter the name of the
Name of New Registered Agent:		
	(Fla	rida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
N B 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.		he obligations of the position
Thereto, accept me appointment as registered agent. I	am jammar min ana accept	ic originate of the position.
	Signature of New Registe	red 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 Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	TREA	Chrislyn Toomer	39203 FL 575 Dade City FL 33523
X Remove 2) Change Add	TREA	Sarah Freemyer	37681 Leafside Lane Zephryhills FL 33541
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		cles, enter change(s) here: (Be specific)	
	<u></u>		

		
		
		
		
·		
		
		
		
		
		
The date of each amendment(s) adoption date this document was signed.	on:, if o	ther than the
June 1 - 20	24	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not be list tent of State's records.	ed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members 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.
June 8, 2024 Dated
Range land
Signature ()((1/CV)) (CYCV)
(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)
Savan Junes
(Typed or printed name of person signing)
President

(Title of person signing)