N49748

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COVER LETTER

TO: Amendment Section Division of Corporations	¥ · · · · · · · · · · · · · · · · · · ·		
NAME OF CORPORATION:	Caim Terrier Club, Inc		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Dionne M. Blaesing, Esq			
	(Name of Contact Person)		
	(Firm/ Company)		
6721 Hudson Ave			
	(Address)		
Hudson, Fl. 34667			
	(City/ State and Zip Code)		
dmblaesing@gmail.com			
E-mail address: (to be	used for future annual report notification)		
For further information concerning this matter, pl	lease call:		
Dionne M. Blaesing, Esq	727 389 7691		
(Name of Contact Pe	rson) (Area Code) (Daytime Telephone Number)		
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:		
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta			
Mailing Address Amendment Section	Street Address Amendment Section		
Division of Corporations	Division of Corporations		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroc Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Central Florida Cairn Terrier Club, Inc					
(Name of Corporation as currently filed with the	e Florida	Dept. of State)			
N49748					
(Docum	nent Numl	ber of Corporation (if known	A'n)		
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statut	tes, this <i>Florida Not For I</i>	Profit Corporation ado	pts the fol	llowing
A. If amending name, enter the new name of the	e corpora	<u>tion:</u>			
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ution" or "incorporated"	or the abbreviation "Co	Ti	he new "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD		6721 Hudson Ave			
		Hudson, FL 34667			
C. Enter new mailing address, if applicable:		(22) H. J			2021
(Mailing address MAY BE A POST OFFICE	BOX)	6721 Hudson Ave		 -	<u> </u>
		Hudson, FL 34667		•	~
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				[11,,	All 10: 44
 If amending the registered agent and/or registered agent and/or the new register 	stered offi	ce address in Florida, en	ter the name of the		<u>ب</u>
new registered agent and/or the new register		4. Blaesing, Esq.		ندن	+-
Name of New Registered Agent:	THOTALE IV	i. biacsing, r.sq.			
	6721 Huc	Ison Ave			
New Registored Office Address:		(Floria	la street address)		
<u> </u>	Hudson		34	6667	
		(Citv)	, Florida /Zip Cod		
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agent	t. 1 am fa	Agent:	obligations of the posi	ition.	
	Si	ignature of New Registere	d 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)	<u>Title</u>	Name	Address
1) Change Add	T	Todd Fogel	1309 SW 8th Ave Fort Lauderdale, FL 33315
× Remove			·
2) Change Add	<u>T</u>	Dionne M. Blaesing Esq	6721 Hudson Ave Hudson, FL 34667
Remove 3) Change Add Remove			
4) Change Add			-
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet	g additional Artic s, if necessary).	eles, enter change(s) here: (Be specific)	
			
	,		
			

 		
		,
		<u></u>
The date of each amendment(s) ad late this document was signed.	option:	, if other than t
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo- locument's effective date on the De	k does not meet the applicable statutory filing requirements, this da artment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	

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adopted by the board of directors.

-	12/21/21
Dated _	—— Docu Signed by:
Signature _	Nicola A. Higgins
(B	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)
	Nicola Higgins
	(Typed or printed name of person signing)
	President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were