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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATIO	PARTNERS FOR E	PETS, INCORPOR	RATED			
DOCUMENT NUMBER: _	N96000005381					
The enclosed Articles of Amo		omitted for filing.				
Please return all corresponde	nce concerning this mat	ter to the following	ā:			
JUDY PETERSON						
		(Name of Contac	rt Person)			
PARTNERS FOR PETS. IN	CORPORATED					
		(Firm/ Comp	oany)			
P O BOX 315						
		(Address)			
MARIANNA, FL 32447						
		(City/ State and Z	Zip Code)			
partnersforpetsmarianna@gm	nail.com					
E-	mail address: (to be used	I for future annual	report not	ification	1)	
or further information conce	rning this matter, please	e call:				
IUDY PETERSON			850 at		693-0605	
()	Name of Contact Person)		Code)	(Daytime Telephone Number)	
Enclosed is a check for the fo	llowing amount made p	ayable to the Florid	da Departn	nent of	State:	
■ \$35 Filing Fee (□S43.75 Filing Fee & Certificate of Status	□S43.75 Filing F Certified Copy (Additional copenclosed)		Certifi Certifi) Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Ad Amendmen			Street Add			
Amendmen	L.M.CLICHI		A 171(*11(*171)**	nt Necti	()11	

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

PARTNERS FOR PETS, INCORPORATED

(Name of Corporation as currently filed with the Flor	rida Dept. of State)	m. p
N96000005381		TO ROOM)
(Document N	lumber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
N/A		The new
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporated	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	P O BOX 315	
	MARIANNA, FL 32	447
D. If amonding the positional sector of the		
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	ice address in Fiorida,	enter the name of the
N/A Name of New Registered Agent:		
Name of New Megistered Agent.		<u>.</u>
		rida street address)
New Registered Office Address:		
N/S	. <u>. </u>	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:	
I hereby accept the appointment as registered agent. I at	m familiar with and accept	the obligations of the position.
	Signature of New Reviste	ered Agent if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, na	ıme,
ind 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	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
l) Change Add	P/D	KENNETH CAMPBELL	
× Remove			
2) Change Add	VP/D	JUDITH PETERSON	
X Remove	T/D	AMANDA PARRISH	
4) Change Add	<u>D</u>	STARLA DEESE	
_x Remove			
5) Change Add			
Remove		_	
6) Change Add			
Remove		_	
E. If amending or addin (attach additional shee)		cles, enter change(s) here: (Be specific)	
N/A			

N/A				
				
-				,
	<u> </u>			
				
			·	
The date of each amendment(s) added this document was signed.	loption:JULY 20, 2	022		, if other than
Effective date if applicable:				
п аррисанте.	(no more than 90) davs after amendm	ent file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the ar	oplicable statutory fil		date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>	ì		

Dated	JULY 20, 2022
Signatur	« Reterson
	(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)
	JUDITH R PETERSON
	(Typed or printed name of person signing)
	RETIRING VICE-PRESIDENT
	(Title of person signing)

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

adopted by the board of directors.

2022 JUL 22 PM 12: 40