

PO6000018649

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

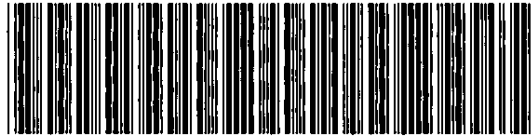
\_\_\_\_\_  
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05/26/09--01002--001 \*\*13.75

05/11/09--01031--018 \*\*30.00

*Amend*

FILED  
09 MAY 22 PM 3:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED MAY 22 2009



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 19, 2009

KYLE THERRIAULT  
SAWYERS PET SAFARI, INC.  
209 N HWY 17-92  
LONGWOOD, FL 32750

SUBJECT: SAWYERS PET SAFARI, INC.  
Ref. Number: P06000018649

We have received your document for SAWYERS PET SAFARI, INC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file your document is \$35.

There is a balance due of \$5.00.

It appears that you completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 009A00016915

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

Attn: Tina Roberts

NAME OF CORPORATION: SAWYERS Pet Safari, Inc

DOCUMENT NUMBER: PO6000018649

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

THERESA SAWYER

Name of Contact Person

SAWYERS Pet Safari

Firm/ Company

209 N. Hwy 17-92

Address

Longwood, FL. 32750

City/ State and Zip Code

SafariSS72@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Theresa Sawyer

Name of Contact Person

at (407) 489-2692

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional copy is enclosed)

**Mailing Address**

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

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RECEIVED  
2009 MAY 22 AM 8:00  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

5.00 short.  
+ 8.75 for c. copy  
\$13.75

Articles of Amendment  
to  
Articles of Incorporation  
of

SAWYERS Pet Safari, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P 06000018649

(Document Number of Corporation (if known))

FILED  
09 MAY 22 PM 3:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

\_\_\_\_\_, Florida  
(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>Theresa Sawyer</u>	<u>6090 Lake Ave</u> <u>Sanford, FL</u> <u>32773</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VP</u>	<u>Scott Sawyer</u>	<u>6090 Lake Ave</u> <u>Sanford, FL</u> <u>32773</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>P</u>	<u>Kyle Therriault</u>	<u>1258 Royal Oak Dr.</u> <u>Winter Springs, FL</u> <u>32708</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

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**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

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The date of each amendment(s) adoption: 5-19-09

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_."  
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated May 19th 2009

Signature Theresa Sawyer

(By a director, president or other officer -- if directors or officers have not been selected, by an incorporator -- if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Theresa Sawyer  
(Typed or printed name of person signing)

President  
(Title of person signing)