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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	L & R RESCUE, J	INC.	
DOCUMENT NUMBER: P10	000095484		
The enclosed Articles of Amena	Iment and fee are su	bmitted for filing.	
Please return all correspondence	concerning this ma	atter to the following:	
Kerry Anne So	hultz Na	ame of Contact Person	
Fountain Sch	ultz & Associates P	.I.,	
T Configuration of the	182 & 713300 lates, 1	Firm/ Company	
2045 Fountain	Professional Ct., St		
		Address	
Navarre, FL 32		. /0:	
	Ci	ty/ State and Zip Code	
<u>kaschultz@four</u> E-ma	ntainlaw.com nil address: (to be us	sed for future annual report	notification)
For further information concern	ing this matter, plea	se call:	
Kerry Anne Schultz		at (<u>850</u>) 939-3535
Name of Contact	Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	wing amount made	payable to the Florida Dep	artment of State:
	3.75 Filing Fee & rtificate 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 Addr Amendment S Division of Co	ection	Amend	Address Iment Section on of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MINUS MOSSO

L & R RESCUE, INC. (Name of Corporation as currently filed)	d with the Fl	orida Dept. of St	nte)	
P10000095484		-		
(Document Number of Co	orporation (if	known)		
tursuant to the provisions of section 607.1006, Floridamendment(s) to its Articles of Incorporation:	la Statutes, th	is <i>Florida Profit</i>	Corporation	n adopts the follo
If amending name, enter the new name of the corp	poration:			
The new name must be distinguishable and contain the value of the designation "Corp.," "Inc.," or Co.," or the designate ame must contain the word "chartered," "professional	tion "Corp,"	"Inc," or "Co".	A profession	
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDR</u>	<u>(ESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))			
. If amending the registered agent and/or registered		ess in Florida, en	ter the name	e of the
new registered agent and/or the new registered of	fice address:			
Name of New Registered Agent:		<u></u>		
	(Florida stree	et address)		
New Registered Office Address:	(City)		_, Florida	(Zip Code)
ew Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I a		ith and accept the	obligations	of the position.
Signature of New	Registered As	gent, if changing	·	

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)

Name

Address

1)

2)

4)

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

Title(s)

Name

Title(s)

Name

Title(s)

Name

1)____

6)____

E: If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Article IX - Dissolution Clause: Upon the dissolution of this organization, assets shall be distributed for one or
more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding
section of any future federal tax code, or shall be distributed to the federal government, or to a state or local
government, for a public purposes.
government, for a public purposes.
,

The date of each amendment(s) adoption: [11 22-1] 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):
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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 November 22,2011
Signature
(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)
Kerry Anne Schultz, Esquire
(Typed of printes name of person signing)
Legistred Dent