P1300001006

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	2 #)		
(Oil	y/State/Zip/Filone	- π)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



500254578675

12/11/13--01011--027 **35.00

10 MUND 10 13/14/13

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Mickey's Pet Supplies, Inc. DOCUMENT NUMBER: P13000017666
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ann Shevin Name of Contact Person Mickey's Pet Supplies Firm/Company 3427 Porter Lake Drive Ste Address O7 Sara Sorta, FL 34240 City/ State and Zip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (248) 310 - 4643 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee

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

Articles of Amendment to Articles of Incorporation

	of	poration		
Distant	. '- 'S' -	+ 9 1: -		
(Name of Corporation as current)	v filed with the Flo	rida Dent of State	~ 10	.C .
D 13	2 000	IT / ./ /		
(Document Number	of Cornoration (if k	(nown)		-
		·		
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this F1	<i>oridu Profit Corporation</i> ado	pts the followin	g amendment(s) to
A. If amending name, enter the new name of the	corporation:			
				_The new
name must be distinguishable and contain the war "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or t	orp," "Inc," or "Ce	o". A professional corporati		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		2427 Por	ter (ake Drive
(Conception of the Control of the Co	<u>DDNESS</u> /	Ste 107		- ,
		Ste 107 Sarasota	e, FL	34240
C. Enter new mailing address, if applicable:			,	•
(Mailing address <u>MAY BE A POST OFFICE</u>)	<u>BOX</u>)			-
		,		_
D. If amonding the projection of another and/or projection		- t- Di-vid-	6.1	
D. If amending the registered agent and/or regis new registered agent and/or the new registered		s m r iorida, enter the name	oi the	3 188
Name of New Registered Agent				方端。
Hame of Hen Registered Agent				二二元
	(Florida street	(address)		- TOO
New Registered Office Address:		Pfunida		72 €
New Registered Office Address.	(City)	, Florida	(Zip Code)	· 5
				,,
New Registered Agent's Signature, if changing R	Desintanad Amané.			
Thereby accept the appointment as registered agent		h and accept the obligations o	of the position.	
Signature of	New Registered Age	ent, 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.

Mike Jones, V as Remov Example:	e, and Sall	y Smith, S	V as an Add.				
X Change	<u>PT</u>	John Doe	2				
X Remove	<u>V</u>	Mike Jon	<u>ies</u>		,		
<u>X</u> Add	<u>sv</u>	Sally Sm	<u>ith</u>				
Type of Action (Check One)	<u>Title</u>	:	<u>Name</u>		<u>Addres</u> s		
Change Add Remove	<u>Lreas</u>	iurer .	Scot	1 Shevin	2427 Ste 10 Saras	Porter Law 07 0ta, FL 3	e Drine Stato
2) Change							
Remove 3) Change Add		<u>.</u> .					
Remove 4) Change Add							
Remove 5) Change Add		- -					
Remove Change Add	different matter and the social						
Remove							

E. <u>If amending or add</u>	ing additional Artic	les, enter change	e(s) here:		
(Attach additional sh	eets, if necessary).	(Be specific)			
- N/A					
					-
					
	<u> </u>			_	
F. If an amendment p	rovides for an excha	ange, reclassifica	tion, or cancellati	on of issued shares	
if not applicab	lementing the amen le, indicate N/A)	idment if not con	itained in the ame	<u>ndment itself:</u>	
N/A					
	 				
		·			
					<u>-</u>

The date of each amendment(s) adoption: $\frac{12/5/13}{4}$ date this document was signed.	if other than the
Effective date if applicable: 12/5/13	
(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	
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	
Signature Aum. Steven, president of the 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)	rector
(Typed or printed name of person signing)	
PRESIDENT / DIRECTO (Title of person signing)	R)