P21000059501

/Pa	questor's Name)	
(Re	questors Name)	
(6.1	(deces)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone #	<i>‡</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filina Officer:	
•	3	

Office Use Only



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10/22/21--01017--014 **35.00

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SEURETARY OF STATE TALLAHASSEE, FLORIDA

2021 OCT 22 AH 7: 3

NOV 3 2021 S. PRATHER

COVER LETTER

TO: Amendment Section,
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	NATION: FULLRY TAIL	LS ANTHAL RE	SCUE AND ADOPTIONS I	NC
DOCUMENT NUME	BER: P2100	100 59501		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	SX	VEILA TRO	TANOWSKI	
	FURRY TAILS L	NIMAL RISCUE	E AND ADOPTIONS INC	
	341 PA	IRIC FOREST	WAY	
		Address	,	
	WEL	LINGTON FO	<u> 33414</u>	
		City/ State and Zip Cod	e	
	Furry TAIL E-mail address: (to be us		DADOPTIONS & GHATL notification)	.co!y
SHS IWA	TO STANOWSK	r = 561	301.2381	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi	ing Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to Articles of Incorporation of

FURNY TAILS ANIMAL RESCUE AND ADOPTIONS IN	NC_
(Name of Corporation as currently filed with the Florida Dept. of State)	
P21000059501	2(
(Document Number of Corporation (if known)	21 0
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amen its Articles of Incorporation:	idm eri t(s 22
A. If amending name, enter the new name of the corporation:	AH 7:
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the victure of the abbreviation "P.A."	rp., ೬ು
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
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:	_
Nr ²	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: Florida (Zip Code)	
(City) (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.	
NA	
Signature of New Registered Agent, if changing	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	

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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	VICTORIA LEDERER	341 PARK FOREST WA
Add Remove			WELLENGTON, FC 3341)
2) Change	P	SHETLA TROJANOWSKI	341 PARK FORIST WAR
Add Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

Attach additional sheets, if ne	cessary). (1	Be specific)			
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<u> 1811</u>					
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f an amendment provides fo	r an exchan	ge, reclassificatio	on, or cancellatio	n of issued sha <u>res</u>	2
provisions for implementing (if not applicable, indica	the amendr	ment if not conta	ined in the amen	idment itself:	
у полирпсине, таки	e way	. 1			
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The date of each amendment(s) adoption: 10/19/2/ date this document was signed.	, if otl	her tha	ın the
Effective date <u>if applicable</u> :		_	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date widocument's effective date on the Department of State's records.	not be	listed :	as the
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required.	d shareho	lder	
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	SECRETARY OF STATE FALLAHASSEE, FLORIDA	2021 OCT 22 AM 7: 39	FILED
Vice President (Title of person signing)			