ND200004115

· (R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ty/State/Zip/Phone #	<i>f</i>)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	e)
(D	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Safari Tod	d Wildlife Productions, Inc.
DOCUMENT NUMBER: NO20000	4115
The enclosed Articles of Amendment and fee are subm	itted for filing.
Please return all correspondence concerning this matter	to the following:
Lynr	ne Hawksworth
	Name of Contact Person)
Safari Todd V	Wildlife Productions, Inc.
	(Firm/ Company)
498	83 Brook Rd
	(Address)
Kissir	mmee, FL 34758
	City/ State and Zip Code)
	thatrk@aol.com
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please c	call:
Lynne Hawksworth	at (407) 933-5242
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & E Certificate of Status	
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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 13, 2013

LYNNE HAWKSWORTH SAFARI TOOD WILDLIFE PRODUCTIONS, INC. 4983 BROOK RD KISSIMMEE, FL 34758

SUBJECT: SAFARI TODD WILDLIFE PRODUCTIONS, INC.

Ref. Number: N02000004115

We have received your document for SAFARI TODD WILDLIFE PRODUCTIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 513A00011733

1EW FORMS PATICIONOUS Thank you

Articles of Amendment to Articles of Incorporation

of

Safari Todd Wildlife Productions, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N02000004115 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: N/A Name of New Registered Agent:

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

New Registered Office Address:

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

N/A

(City)

NIK

(Florida street address)

Florida

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)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD$.

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 De V Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
l) Change	PVPS	Dawn Drever	461 Americana Blvd NW
Add			Palm Bay
X Remove			FL 32907n
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
			-
5) Change		-	
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
Change.			
6) Change			
Add			, , , , , , , , , , , , , , , , , , ,
Remove			

N/A						
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The date of each amendment	s) adoption: IVIAY 1, 2013			
Effective date if applicable:	as above : May 1, 2013			
(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/we was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.			
There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were irectors.			
Dated	/ 21, 2013			
Signature(By the	chairman or vice chairman of the board, president or other officer-if directors			
	ot been selected, by an incorporator - if in the hands of a receiver, trustee, or			
other c	ourt appointed fiduciary by that fiduciary)			
	Lynne Hawksworth			
	(Typed or printed name of person signing)			
	Deputy Treasurer			
	(Title of person signing)			