## NO2000004115

| (Re                                     | equestor's Name)  | )           |  |
|---|-------------------|-------------|--|
| (Ac                                     | idress)           | <del></del> |  |
| (Ac                                     | ddress)           | <del></del> |  |
| (Ci                                     | ty/State/Zip/Phon | ne #)       |  |
| PICK-UP                                 | ☐ WAIT            | MAIL        |  |
| (Ві                                     | usiness Entity Na | me)         |  |
| (Document Number)                       |                   |             |  |
| Certified Copies                        | _ Certificate     | s of Status |  |
| Special Instructions to Filing Officer: |                   |             |  |
|   |                   |             |  |
|   |                   |             |  |
|   |                   |             |  |
|   |                   |             |  |

Office Use Only



400250306734

08/08/13--01008--003 \*\*35.00

13 AUG -8 PH 3: 15

AUG 1 3 2013

T. BROWN

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** Safari Todd Wildlife Productions, Inc N02000004115 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Lynne Hawksworth (Name of Contact Person) Safari Todd Wildlife Productions, Inc (Firm/ Company) 4983 Brook Rd (Address) Kissimmee, FL 34758 (City/ State and Zip Code) howsthatrk@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lynne Hawksworth (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) **Mailing Address** Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## 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)

| N02000  | 004115  |              |
|---|---|--------------|
| (Document Number of Co  | rporation (if known)                                  | _            |
| Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:          | s. this Florida Not For Profit Corporation adopts the | e following  |
| A. If amending name, enter the new name of the corporati  | on;   |              |
| N   | I/A   | The new      |
| name must be distinguishable and contain the word "corporat   | ion" or "incorporated" or the abbreviation "Corp."    |              |
| "Company" or "Co." may not be used in the name.  B. Enter new principal office address, if applicable:                  | N/A   | <del></del>  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   |   |              |
|   |   | <del>-</del> |
|   |   | _            |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                                 | N/A   |              |
| (Manny unases)  |   | <del></del>  |
|   |   | _            |
|   |   | -            |
| D. If amending the registered agent and/or registered offic   |   |              |
| new registered agent and/or the new registered office a   |   |              |
| Name of New Registered Agent:   | 1   |              |
|   | (Florida street address)                              |              |
| New Registered Office Address:  | (Fioriau street aduress)                              |              |
| N/A   | N Florida   |              |
| (City)  | (Zip Cod  | le)          |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fail |   |              |
| Signature of New  | Registered Agent, if changing                         |              |

Page 1 of 4

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: X Change X Remove X Add | V Mik        | n Doe<br>te Jones<br>ty Smith |  |
|----------------------------------|--------------|-------------------------------|--|
| Type of Action<br>(Check One)    | <u>Title</u> | <u>Name</u>                   | <u>Addres</u> s  |
| 1) Change                        | C            | Dawn Drever                   | 1617 Kemberlty Ave   |
| X Add                            |              |                               | Titusville, FL 32796   |
| Remove                           |              |                               |  |
| 2) Change                        | С            | Michelle Olandese             | 1826 Cornerview Lane   |
| X Add                            |              |                               | Orlando, FL 32820  |
| Remove                           | Р            | Ramona Lashbrook              | 1105 Old Dixie Hwy   |
| 3) Change Add                    | <u> </u>     | <u> </u>                      | Titusville, FL 32796   |
| Remove                           |              |                               |  |
| 4) Change                        |              |                               | Name of the contract of the co |
| Add                              |              |                               |  |
| Remove                           |              |                               |  |
| 5) Change                        |              |                               |  |
| Add                              |              |                               |  |
| Remove                           |              |                               |  |
| 6) Change                        | -            |                               |  |
| Add                              |              |                               |  |
| Remove                           |              | Page 2 of 4                   |  |

| utach additional sheets, if necessary). | (Be specific) |
|---|---------------|
| i i                                     | NI/A          |
| **************************************  | N/A           |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   | <del></del>   |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |
|   |               |

|      | e date of each amendment(s) adoption:  | , ii omer man me |
|------|--|------------------|
| Effe | ective date if applicable: 8/5/2013  |                  |
|      | (no more than 90 days after amendment file date)   |                  |
| Ada  | option of Amendment(s) (CHECK ONE)   |                  |
|      | The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval. |                  |
|      | There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.   |                  |
|      | Dated August 5, 2013   |                  |
|      | Signature  |                  |
|      | (By the chairman of vice chairman of the board, president or other officer-if directors  | •                |
|      | have not been selected, by an incorporator – if in the hands of a receiver, trustee, or  |                  |
|      | other court appointed fiduciary by that fiduciary)   |                  |
|      | Lynne Hawksworth   |                  |
|      | (Typed or printed name of person signing)  |                  |
|      | Deputy Treasurer   |                  |
|      | (Title of person signing)  |                  |