

| (Requestor's Name)                      |
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R. WHITE JUL 0 2 2018

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: SAWG   | INTERNATIONAL INC.   |  |  |
|---|--|--|--|
| DOCUMENT NUMBER: N18000   | 002640   |  |  |
| The enclosed Articles of Amendment and fee are subr                                   | nitted for filing.   |  |  |
| Please return all correspondence concerning this matter                               | er to the following:   |  |  |
| LARRY D. CHAVERS, S   | K.   |  |  |
| WANT - CITY   | (Name of Contact Person)   |  |  |
|   |  |  |  |
|   | (Firm/ Company)  |  |  |
| 530 ST. MARY ROAD   | • • •  |  |  |
|   | (Address)  |  |  |
| OSTEEN FL 3276  | 4  |  |  |
|   | (City/ State and Zip Code)  (City/ State and Zip Code)  (City/ State and Zip Code)  (City/ State and Zip Code) |  |  |
| For further information concerning this matter, please                                |  |  |  |
|   | at 1/386/956/8209  |  |  |
| (Name of Contact Person   | (Area Code) (Daytime Telephone Number)   |  |  |
| Enclosed is a check for the following amount made pa                                  | yable to the Florida Department of State:  |  |  |
| □ \$35 Filing Fee  □\$43.75 Filing Fee & Certificate of Status                        |  |  |  |
| Mailing Address   | Street Address   |  |  |
| Amendment Section Amendment Section Division of Corporations Division of Corporations |  |  |  |
| P.O. Box 6327 Clifton Building  |  |  |  |
| Tallahassee, FL 32314   | . 2661 Executive Center Circle   |  |  |

Tallahassee, FL 32301

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## to Articles of Incorporation

Articles of Amendment of

| SAWG FINTERNATIONAL FNC.   |                          |
|--|--------------------------|
| (Name of Corporation as currently filed with the Florida Dept. of State)   | <del></del> _            |
| N18000002640   |                          |
| (Document Number of Corporation (if known)   | •                        |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts amendment(s) to its Articles of Incorporation:  SAVED WITH HIM STATE STATE TO STATE S | 7                        |
| A. If amending name, enter the new name of the corporation:  | Slocker                  |
| SAVEDWITH AMAZING GRACE INTERNATIONAL INC.   | (Manager)                |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Cor "Company" or "Co." may not be used in the name.   | The new<br>p." or "Inc." |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  |                          |
|  |                          |
| <del></del>  | <del></del>              |
| 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:  |                          |
| Name of New Registered Agent:  |                          |
|  |                          |
| New Registered Office Address:  [Florida street address]   |                          |
| , Florida  |                          |
| (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 positi  | ion.                     |
|  |                          |
| 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 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 Do           V         Mike Jo           SV         Sally Sr | ones |         |
|----------------------------------|--|------|---------|
| Type of Action<br>(Check One)    | Title  | Name | Address |
| 1) Change Add                    |  |      |         |
| Remove                           |  |      |         |
| 2) Change                        |  |      |         |
| Add Remove                       |  |      |         |
| 3 ) Change                       |  |      |         |
| Add Remove                       |  |      |         |
| 4) Change                        |  |      |         |
| Add                              |  |      |         |
| Remove                           |  |      |         |
| 5) Change Add                    |  |      |         |
| Remove                           |  |      |         |
| 6) Change                        |  |      |         |
| Add<br>Remove                    |  |      |         |

| If amending or adding additional Artestach additional sheets, if necessary). | (Be specific) |   |
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Page 3 of 4

| The date of each amendment(s) a date this document was signed.               | doption: 5/31/18  | , if other than the                 |
|--|---|-------------------------------------|
| Effective date <u>if applicable</u> :  |   |                                     |
|  | (no more than 90 days after amendment file date)  |                                     |
| Note: If the date inserted in this blood document's effective date on the Do | ock does not meet the applicable statutory filing requirements, epartment of State's records.   | this date will not be listed as the |
| Adoption of Amendment(s)   | (CHECK ONE)   |                                     |
| ☐ The amendment(s) was/were a was/were sufficient for approv                 | adopted by the members and the number of votes cast for the an  | nendment(s)                         |
| There are no members or mem adopted by the board of direct                   | nbers entitled to vote on the amendment(s). The amendment(s) tors.  | was/were                            |
| Dated  | 124-12018   |                                     |
|  | irman or vice chairman of the board, president or other officer-<br>een selected, by an incorporator – if in the hands of a receiver, |                                     |
| other court  | appointed fiduciary by that fiduciary)  | -                                   |
| LAX  | CHAVERS, SR.  (Typed or printed name of person signing)   | <del></del>                         |
| PRE:   | SIDEN (Title of person signing)   | ·                                   |