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Office Use Only



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TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Sawtes-McCoy Enterprises, Inc.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Cory Schafet Name of Contact Person World Martial Afts Center Firm/ Company 333 SW 140 Terrace Address Jonesville, FL 32669 City/ State and Zip Code Schaffiska@aol.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
or factor information concerning this matter, please can.
Steve Repsold at (352) 331-3557 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

FILED

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Saw es - Mc (oy Enterprises (Name of Corporation as currently filed with the F	Horida Dept. of State) TALL AHASSEE, FLORIBA
	TALEAHASSEE, FLURIDA
F97635	19
(Document Number of Corporation (i	
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation at pts the following amendment(s
. If amending name, enter the new name of the corporation:	
Sawyer-Schafer Enterprises, I	NC The new
name must be distinguishable and contain the word "corporation". "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address 	
Name of New Registered Agent	
$\mathcal{A} \setminus \mathcal{N}$	
(Florida str	reet address)
Nava Basistanad Office Address	, Florida
New Registered Office Address: (City)	
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	
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)

. 1 1

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	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	/ / h	<u>Addres</u> s
1) Change		/\	/ <u>/ </u>	
Add				
Remove				
2) Change				-
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5)Change		***************************************		
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary). (Be specific) NA If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A) NA		e <u>re</u> :	les, enter change	dding additional Artic	. If amending or addi
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The date of each amendment(s) ac	loption:, <u>2 - 15 - 13</u>
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement 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	(voting group)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated	115/13
selected	irector, president or other officer—if directors or officers have not been d, by an incorporator—if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)
	Cory Schafet (Typed or printed name of person signing)
	,
	Co-Owner Director
	(Title of person signing)