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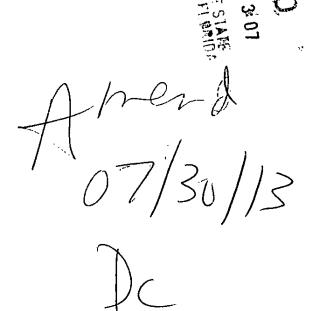
(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Save O	ur Lakes Org	anization inc.
DOCUMENT NUMBER: N 00000	02860	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Vivian H. Katz	J	
	(Name of Contact Persor	1)
Save Our Lakes Organ	nization, inc.	
	(Firm/ Company)	
P.O. Box 185		
	(Address)	· · · · · · · · · · · · · · · · · · ·
Keystone Heights, FL	32656	
	(City/ State and Zip Code	e)
save-our-lakes(
E-mail address: (to be t	ised for future annual report	notification)
For further information concerning this matter, ple	ase call:	
Vivian Katz	352 at (473-2494 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount mad	e payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	c. & \$\subseteq\$	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ameno Divisio Clifton	Address Iment Section on of Corporations Building
Tallahassee, FL 32314	2661 E	xecutive Center Circle

Taliahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of	
Save Our Lakes Organization, Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	75
N0000002860	
(Document Number of Corporation (if known)	200
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For P</i> amendment(s) to its Articles of Incorporation:	rofit Corporation adopts the follow
A. If amending name, enter the new name of the corporation:	
	The n
name must be distinguishable and contain the word "corporation" or "incorporated" of	or the abbreviation "Corp." or "Inc
"Company" or "Co." may not be used in the name.	
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</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, en new registered agent and/or the new registered office address:	ter the name of the
Name of New Registered Agent:	
(Plant In court address)	
(Florida street address) New Registered Office 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 position.
, ,	J , ,
IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	ging

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	<u>V</u> <u>Mil</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	٠ VD	Joseph Califano	6120 S. Twin Lakes
Add ·	.	-	Keystone Heights, F
X Remove			32656
2) Change	٠VD	Webb Farber	P.O. Box 355
X Add			Keystone Heights, F
Remove			32656
3) Change	. TD	Sherman Katz	6579 Immokalee Rd
Add			Keystone Heights, F
X Remove			32656
4) Change	, TD	Judith Baumgardner	6809 Immokalee Rd
X Add			Keystone Heights, F
Remove			32656
5) Change	, D	James Young	6432 Brooklyn Bay f
Add			Keystone Heights, F
X Remove			32656
6) Change	, D	Jacqueline King	275 SE Lakeview Dr
Add			Keystone Heights, F
X Remove			32656
Kemove		D 4 64	

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.

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Example: X Change X Remove X Add	V Mik	n <u>Doe</u> te <u>Jones</u> y <u>Smith</u>	•
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>D</u> ,	Scott Slater	6596 Immokalee Rd
X Add			Keystone Heights, F
Remove			32656
2) Change	D ,	Chandler Rozear	1719 NW 40 Terrace
X Add	***************************************		Gainesville, FL 3260
Remove	D ′	Pat. Welsh	6977 Immokalee Rd
3) Change			Keystone Heights, F
^Add			32656
Remove			02000
4) Change	- D	Joseph Califano	6120 S. Twin Lakes
X Add		•	Keystone Heights, F
Remove			32656
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

F. If amending or adding additional Arti	icles enter change(s) here:
E. If amending or adding additional Articatuch additional sheets, if necessary).	(Be specific)
(======================================	(
•	
	<u> </u>
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The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable: July 1, 2013	
(no more than 90 days after amendment file date)	
Adoption 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 July 22, 2013	
Signature Wish	
(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)	
Vivian H. Katz	
(Typed or printed name of person signing)	
President	
(Title of person signing)	