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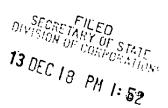
TO: Amendment Section Division of Corporation

Division of Corporations							
NAME OF CORPORATION: Gavcarr	Foundation	Incorporated					
DOCUMENT NUMBER: N0300001186 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following:							
					Seana Westcarr-Gray		
						(Name of Contact Person	n)
	(Firm/ Company)						
2736 Delmar Drive							
	(Address)						
Great Falls, MT 59404							
	(City/ State and Zip Cod	e)					
seana12b@yahoo.com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, pleas	se call:						
Seana Westcarr-Gray	_{at (} 434	326-0885					
(Name of Contact Person)		ode & Daytime Telephone Number)					
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:					
■ \$35 Filing Fee	Certified Copy (Additional copy is enclosed)	□\$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	Street Address Amendment Section Division of Corporations Clifton Building					

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



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name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp. "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) n/a	 e followi
(Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the timendment(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. "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	 e followi
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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: n/a	
(Florida street address)	
New Registered Office Address:	
, Florida	
(City) (Zip Cod	le)
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	

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 I V Mike . SV Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	D/VP	Geneva Edmead	34590 South Golden Lane
Add			Black Canyon City, AZ
Remove			85324
2) Change			
Add			***
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art	ticles, enter change(s) here:
E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
n/a	
n/a	

date this document was signed.	. if other than the
Effective date if applicable:	
(no more than 90 days after amendme	ent file date)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of vowas/were sufficient for approval.	tes cast for the amendment(s)
There are no members or members entitled to vote on the amendment(s). T adopted by the board of directors.	he amendment(s) was/were
Dated 12/12/13	
Signature Seara Westearr-Gran	1
(By the chairman or vice chairman of the board, president have not been selected, by an incorporator — if in the har other court appointed fiduciary by that fiduciary)	t or other officer-if directors
Seana Westcarr-Gray	
(Typed or printed name of person signing) D/CEO	
(Title of person signing)	··· · · · · · · · · · · · · · · · · ·