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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Legacy Internation	nal Coalition, Inc.	
	ER: N04000001535		
	of Amendment and fee are su	bmitted for tiling.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Joshua Fowler		
•		Name of Contact Person	1
	Legacy International Coalit	tion, Inc.	
		Firm/ Company	
	4037 Brooke Stone Drive		
		Address	
	Panama City, Florida 3240	95	
		City/ State and Zip Code	e
ddow	ler@me.com		
——————————————————————————————————————	•	sed for future annual report	notification)
	E-man address, 110 oc d.	sed for raidic anitial report	notification)
For further information	concerning this matter, pleas	se call:	
Joshua Fowler		at (760-8400 de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame	ling Address ndment Section sion of Corporations	Amend	Address Iment Section on of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



Articles of Amendment to Articles of Incorporation of

Legacy International Coalition, Inc.	1015 Co. = 1 1. (11 23		
(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
N04000001535	•		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
Awake The World, Co.	The new		
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	4037 Brooke Stone Drive		
(Principal office address MUST BE A STREET ADDRESS)	Panama City, Florida 32405		
C. Enter new mailing address, if applicable:	P.O. Box 1833		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
	Lynn Haven, Florida 32444		
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre			
Name of New Registered Agent			
(Florida s	street address)		
New Registered Office Address:	, Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Ager	nt:		
I hereby accept the appointment as registered agent. I am familia			
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)

Example:

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.

\underline{X} Change	<u>PT</u>	John De	<u>ne</u>		
X Remove	<u>V</u>	Mike Jo	nes		
X Add	<u>SV</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1) Change					
Add					
Remove					
2) Change					
Add					,
Remove					
3) Change		_		-	
Add					
Remove					
4) Change				_	
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_		_	
, Add					
Remove					



If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	<u>—-</u> -		
	<u> </u>			
f an amendment provides for an exch	ange, reclassification.	or cancellation of iss	ned shares	
provisions for implementing the amer (if not applicable, indicate N/A)	idment if not containe	d in the amendment	itself:	
(i) not applicable, than are (vix)				
				

date this document was signed.	s) adoption:, if other than th
<u> </u>	05-01-2019
meenve unte <u>ii apprenime</u> .	(no more than 90 days after amendment file date)
	his block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/wer- by the shareholders was/we	adopted by the shareholders. The number of votes east for the amendment(s) re sufficient for approval.
	approved by the shareholders through voting groups. The following statement for 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)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
05-01-	2019
Dated Signature	Shadal
(B) se	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Dr. Joshua Fowler
	(Typed or printed name of person signing)
	President
	(Title of person signing)

