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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Save Abe of
DOCUMENT NUMBER: N 0 9 0 0 0 0 1 0 6 3 5
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Girsham Tilak (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
10601 State Street #9
Tamarac, FL 33321 (City/ State and Zip Code)
Sham tilak @ gol. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sham IIIak at 954 778 3222 (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 S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) S35 Filing Fee S43.75 Filing Fee & Certified Copy (Additional Copy is Enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

Name of Corporation as currently filed with the Florida Dept. of State) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Save Abee Foundation Inc The new name must be distinguishable and contain the word "corporation" or "incorporated" 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 MUST BE A STREET ADDRESS) 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: (Florida street address) New Registered Office Address: Florida (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. 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove	<u></u>		
Change Add Remove			
6) Change Add Remove			

attach additional sheets, if necessary),	(Be specific)				
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The date of each amendment(\dot{s}) add	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no moré than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, to artment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adways/were sufficient for approval	opted by the members and the number of votes cast for the am	endment(s)
☐ There are no members or memb adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) rs.	was/were
Dated Mo	y 01, 2017	
Signature		
have not bee	man or vice chairman of the board, president or other officer-in selected, by an incorporator – if in the hands of a receiver, to ppointed fiduciary by that fiduciary)	
	Girsham Tilak (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Founder	
	(Title of person signing)	