Florida Department of State

Division of Corporations
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ter the email address for this business entity to be used for futu annual report mailings. Enter only one email address please.**

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COR AMND/RESTATE/CORRECT OR O/D RESIGN SAVING PAWS 4 LOVE, INC.

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JUL 06 2015

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Articles of Amendment to Articles of Incorporation of

2915 JUL -2 RM 12: 07

SAVINGS PAWS 4 LOVE, INC.				
(Name of Cu	rooration as currently fi	led with the Florida Dept. of State)		
N15000002005		***		
	(Document Number of	Corporation (if known)		
The contract of the contract of the first	1000 Florido Stantos th	is Florida Not For Profit Corporation adopts the following		
amendment(s) to its Articles of Incorpora	tion:	151 107 110 1 1 07 1 1 07 1 1 07 1 1 1 1 1		
A. If amending name, enter the new m	ame of the corporation:			
		The new		
name must be distinguishable and contai "Company" or "Co." may not be used in	n the word "corporation" n the name.	or "incorporated" or the abbreviation "Corp." or "Inc."		
B. Enter new principal office address,	if annlicable:	1002 SALZEDO STREET		
(Principal office address MUST BE A S	TREET ADDRESS)	APT 2		
		CORAL GABLES, FL 33134		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1002 SALZEDO STREET		
		APT 2		
		CORAL GABLES, FL 33134		
D. If amending the registered agent an new registered agent and/or the nev	d/or registered office ad v registered office addre	dress in Florids, enter the name of the		
Name of New Registered Agent	ILDABETE POLK			
	1002 SALZEDO STREI	ET APT 2		
	(Florida :	street address)		
New Registered Office Address:	CORAL GABLES	, Florida 33134		
		(City) (Zip Code)		
New Registered Agent's Signature, if cl	ing water of The sales of the sales			
I hereby accept the appointment as registe	ered agent. I am familiai	<u>11:</u> r with and accept the obligations of the position.		
Wes	bete Poft			
	, Signature of New	Registered Agent, if changing		

X_Change

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 Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	mith.	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP	_	JOSELITA MOREIRA	2808 S 28th STREET
Add				FORT PIERCE, FL 34981
X Remove				
2) Change	<u>T</u>	_	KATHERINE MOREIRA	2808 S 28 STREET
Add				FORT PIERCE, FL 34981
X Remove				
3) X Change	P	_	ILDABETE POLK	1002 SALZEDO STREET
Add		_		APT 2
Remove				CORAL GABLES, FL 33134
<u> </u>				
4) Change		_		•
A ďd				.
Кеточе				
5) Change				
Add		_		
Remove				
Remove				
δ) Change		_		
Add				
Remove				

	ch additional sheets, if	necessary). (De sp	,cogrey			
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						<u> </u>
						
Tf ar	amendment provide	u far an evekande r	*classification of	cancellation of i	saned shares.	
D10	visions for implement	ting the amendment	if not contained	in the amendmen	t itself:	
	amendment provides visions for implement (if not applicable, ind	ticate N/A)				
· · · · · ·	· ·					

The day of each ampederately also	July 1, 2015	if arhan rhan sha
The date of each amendment(s) ado date this document was signed.	pnon:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	x does not meet the applicable statutory filing requirements, this date will rainment of State's records.	not he listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	
There are no members or members adopted by the board of director.	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated		
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diffiduciary by that fiduciary)	·
II	DABETE POLK	
_	(Typed or printed name of person signing)	
P	RESIDENT	
_	(Title of person signing)	

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