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18 JUL 19 AH 8: 08
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

JUL 23 2018 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: SAVE OUR KEY DEER, INC.
DOCUMENT NUMBER: N 1700000 7013
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
VALERIE PREZIOSI
(Name of Contact Person)
SAVE OUR KEY DEER, INC.
(Firm/ Company)
2076 LONG BEACH DRIVE
(Address)
BIG PINE KEY, FL 33043
(City/ State and Zip Code)
VALERIE @ OCEANI . COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VALERIE PREZIOSI at 760-807-9064
(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:
\$35 Filing Fee
Mailing Address Amendment Section Street Address Amendment Section
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
Tallahassee, Fl. 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

SAVE OUR REG DEEK,	FN(.
(Name of Corporation as currently	filed with the Florida Dept. of State)
N17000070	13
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>ı.</u>
	The new
name must be distinguishable and contain the word "corporatio "Company" or "Co." may not be used in the name.	n" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	SI SI
· _	AN U
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SSE SO
	0
•	08 80 B
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ado	
Name of Nam Projectored Agant	

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

(Florida street address)

, Florida _

(Zip Code)

(City)

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add		Doc Jones Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	D	DEB U	JAHL	1350 LONG BEACH Drive
Add				BIG PINE KEY FL 33043
Remove				FL 33043
2) Change				
Add				
Remove				
3.1 Change				
Add				
Remove				
4) Change	· .		. <u></u>	
Add				
Remove				
51 Change				
Add				
Remove				
6) Change			 	
Add				•
Remove				<u> </u>

utach additional sheets, if necessary).	(Be specific)		
	.		
		 -	
			-

The date of each amendment(s) adoption:	if other than the
Effective date if applicable: 6-18-18	
(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this delocument's effective date on the Department of State's records.	ite will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment was/were sufficient for approval.	ent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/v adopted by the board of directors.	⁄ere
Dated $\frac{7-9-18}{}$	
Signature	
(By the chairman or vice chairman of the board, president or other officer-if direction have not been selected, by an incorporator – if in the hands of a receiver, trustee other court appointed fiduciary by that fiduciary)	
VALERIE PREZIC) S #
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	