N1900000 7943

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Amend

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COVER LETTER,

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: SAVE NORTH WEST,	INC	_	
DOCUMENT NUMBER: N19000007943			
The enclosed Articles of Amendment and fee are submitted	ed for filing.		
Please return all correspondence concerning this matter to	the following:		
CARE OF MIRLINE PETIT			
(Na	ame of Contact Perso	าน)	
SAVE NORTH WEST, INC			
	(Firm/ Company)	-	
14068 SW 49TH STREET			
	(Address)		
MIRAMAR FL 33027			
(Cit	y/ State and Zip Cod	le)	
thetaxgurus@yahoo.com			
E-mail address: (to be used for	future annual report	notificatio	n)
For further information concerning this matter, please call:			
CLAVAROCHE AMICY	78 at	6	320-1452
(Name of Contact Person)		ca Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida Dep	artment of	State:
(A	3.75 Filing Fee & ertified Copy dditional copy is aclosed)	Certif Certif	Filing Fee cate of Status ed Copy is seed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amend Divisio	Address ment Secti n of Corpo entre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SAVE NORTH WEST, INC.

(Name of Corporation as currently filed with the Florida I N19000007943	pept. or State)
	er of Corporation (if known)
Pursuant to the provisions of section 617,1006. Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
N/A	71
name must be distinguishable and contain the word "corporal "Company" or "Co." may not be used in the name.	The new 'incorporated' or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
(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
D. If amending the registered agent and/or registered office	e address in Florida, enter the name of the
new registered agent and/or the new registered office as	guress:
Name of New Registered Agent:	
N/A	
New Registered Office Address:	(Florida street address)
A /	10
/\/ _/	(City) Florida // //
/	(Ciţi) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
hereby accept the appointment as registered agent. I am fan	ultar with and accept the obligations of the position.
	1/19
Sig	insture 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:

F = 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 Reniove X Add	<u>PT</u> <u>V</u> SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add		- N/A	
Remove		1	
2) Change Add		- N/A	
Remove 3) Remove Add Remove		- N/A	
4) Change Add		-N/A	
Remove		1	
5) Change Add		- N/A	
Remove		/	
6) Change Add		-N/A	
Remove			
E. If amending or addin (attach additional shee	ng addition ets. if nece	nal Articles, enter change(s) here: ssary). (Be specific)	
To meet the requirements	of the or	ganizational test of IRC Section 501(c)(3)	, the officers of board of Save North West, Inc.
		f the organization articles of Incorporation	
Article III-a Purpose of			
		to help improving the lives of the people v	vho live in the northwest of Haiti
			poses; will also engage in activities that will

foster national or international amateur sports competition, and prevent cruelty to children or animals, including, for su	uch
purposes, the making of distributions to organizations that qualify as exempt organization described under section 501	(c)(3)
of the Internal Revenue Code, or corresponding section of any future federal tax code.	 -
Article III-b _ Dissolution of the organization:	
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meani	ng of
section 501(c)(3) of the Internal Revenue Code, or corresponding, section of any future federal tax code, or shall be	
be distributed to the federal government, or to a state or local government, for a public purpose.	
The date of each amendment(s) adoption: July 15, 2020 date this document was signed.	f other than the
Effective date if applicable: (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 date will not be I document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE)	isted as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated	07/15/2020
	Marsa Clares Oli
Signatur	(By the chairman or vice chairman of the board, president or other officer-if directors
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	CLAVAROCHE AMICY
	(Typed or printed name of person signing)
	PRESIDENT