

N00000003097

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

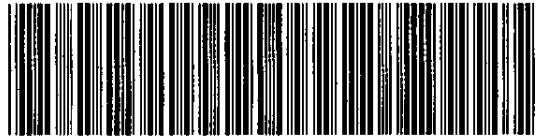
(Document Number)

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Certificates of Status ☒

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02/25/10--01026--012 \*\*43.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 MAR 16 P 2:03

FILED

Amend NC  
Revers  
3-16-10

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Brevard School Readiness Coalition Inc.

DOCUMENT NUMBER: N00000003097

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cathie Odom  
(Name of Contact Person)

Brevard School Readiness Coalition Inc.  
(Firm/ Company)

1018 Florida Avenue  
(Address)

Rockledge, FL 32955  
(City/ State and Zip Code)

codom@elcbrevard.org  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cathie Odom at ( 321 ) 637-1800 x 2012  
(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

☒ \$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)

**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



PO BOX 560692  
ROCKLEDGE, FL 32956-0692  
PHONE: (321) 637-1800  
FAX: (321) 637-7244  
WWW.ELCBREVARD.ORG

March 12, 2010

Darlene Connell  
Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: N00000003097

Dear Ms. Connell,

Please find attached our corrected Articles of Amendment for the above referenced document number. We have included the titles for the officers/directors as requested in letter number, 510A00005278 (copy attached).

Thank you for bringing this to our attention and please process the Amendment upon receipt. If you have any questions, please contact me at (321) 637-1800 ext. 2012.

Sincerely,

Cathie Odom  
Director of Business Operations

LAUNCHING A CHILD'S FUTURE!



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 3, 2010

CATHIE ODOM  
BREVARD SCHOOL READINESS COALITION, INC.  
1018 FLORIDA AVE.  
ROCKLEDGE, FL 32955

SUBJECT: BREVARD SCHOOL READINESS COALITION, INC.  
Ref. Number: N00000003097

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

PLEASE PROVIDE A TITLE FOR THE OFFICERS/DIRECTORS BEING ADDED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell  
Regulatory Specialist II

Letter Number: 510A00005278

RECEIVED  
2010 MAR 16 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

RECEIVED MAR 08 2010

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2010 MAR 16 P 2:03

Brevard School Readiness Coalition, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N00000003097

(Document Number of Corporation (if known))

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:**

Early Learning Coalition of Brevard County 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:

Cathryn Odom

New Registered Office Address:

1018 Florida Ave

(Florida street address)

ROCKLEDGE

(City)

Florida 32955  
(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.*

C. Odom

Signature of New Registered Agent, if changing

(Attach additional sheets, if necessary)

(attach additional sheets, if necessary). (Be specific)

[illegible]

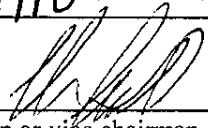
TITLE	NAME	ADDRESS	ACTION
S	Myrna Shimei	375 Commerce Pkwy, Suite 101 Rockledge, FL 32955	Add
S	Marcy Brilley	597 Haverty Court, Suite 40 Rockledge, FL 32955	Delete
VC	Marcy Brilley	597 Haverty Court, Suite 40 Rockledge, FL 32955	Add

The date of each amendment(s) adoption: 01/19/2010  
(date of adoption is required)  
Effective date if applicable: 02/01/2010  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 1/19/10

Signature   
(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)

Shannon Smithwick  
(Typed or printed name of person signing)

Chairperson  
(Title of person signing)