

# 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000003169

FILED  
Mar 15, 2012  
Secretary of State

**Entity Name:** LINK SOLUTIONS CHARITY FOUNDATION INC.

**Current Principal Place of Business:**

1451 W CYPRESS CREEK RD  
STE 300  
FORT LAUDERDALE, FL 33309 US

**New Principal Place of Business:**

1500 W CYPRESS CREEK RD  
STE 302  
FORT LAUDERDALE, FL 33309 US

**Current Mailing Address:**

1451 W CYPRESS CREEK RD  
STE 300  
FORT LAUDERDALE, FL 33309 US

**New Mailing Address:**

1500 W CYPRESS CREEK RD  
STE 302  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** 26-4568372

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MENELAS, JACQUESSAINT  
3370 NW 21ST CT  
COCONUT CREEK, FL 33066 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** MENELAS JACQUESSAINT

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MENELAS, JACQUESSAINT  
**Address:** 3370 NW 21ST CT  
**City-St-Zip:** COCONUT CREEK, FL 33066 US

**Title:** VP  
**Name:** DOMINIQUE, SAMIA  
**Address:** 3854 LYONS RD APT 208  
**City-St-Zip:** COCONUT CREEK, FL 33073

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JM

P

03/15/2012

Electronic Signature of Signing Officer or Director

Date