

N113000010281

(Requestor's Name)

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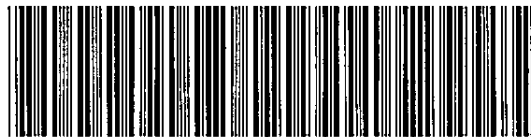
(Business Entity Name)

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DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 24 PM 8:44

Amend/cus
@ 1.27.14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Life Connectors, Inc.

DOCUMENT NUMBER: N13000010281

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

Please return all correspondence concerning this matter to the following:

Stuart Goldberg

(Name of Contact Person)

Law Offices of Stuart E. Goldberg, PL

(Firm/ Company)

P.O. Box 12458

(Address)

Tallahassee, FL 32317

(City/ State and Zip Code)

dewilkins22@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stuart Goldberg

(Name of Contact Person)

at (850) 222-4000

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

**ARTICLES OF AMENDMENT TO THE ARTICLES OF INCORPORATION
OF
LIFE CONNECTORS, INC.**

Pursuant to the provisions of Section 617.1006, Florida Statutes, the Articles of Incorporation of the above-named not for profit corporation (the "Corporation"), filed with the Department of State on November 14, 2013, effective as of January 1, 2014, and assigned Charter Number N13000010281, are hereby amended pursuant to a written consent in lieu of meeting executed by all of the Corporation's Directors on the 23rd day of January, 2014, as follows:

ARTICLE I

ARTICLE XV is hereby added to read as follows:

Article XV

Distribution of Income

The Corporation is required to distribute its income in each taxable year at such time and in such manner as not to subject the Corporation to tax under section 4942 of the Internal Revenue Code.

ARTICLE II

ARTICLE XVI is hereby added to read as follows:

Article XVI

Prohibited Acts

The Corporation is prohibited from engaging in any act of self-dealing (as defined in section 4941(d) of the Internal Revenue Code), from retaining any excess business holdings (as defined in section 4943(c) of the Internal Revenue Code), from making any investments in such manner as to subject the Corporation to tax under section 4944 of the Internal Revenue Code, and from making any taxable expenditures (as defined in section 4945(d) of the Internal Revenue Code).

ARTICLE III

Adoption of Amendment

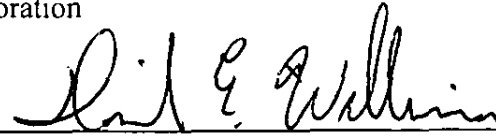
There are no Members to vote on this amendment. The Board of Directors unanimously adopted this amendment to the Articles of Incorporation on January 23, 2014.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 24 AM 8:43

The undersigned, being the President of Life Connectors, Inc., hereby certifies that the above and foregoing Articles of Amendment to the Articles of Incorporation were adopted as aforesaid on the 23rd day of January, 2014.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the Corporation on this 23rd day of January, 2014.

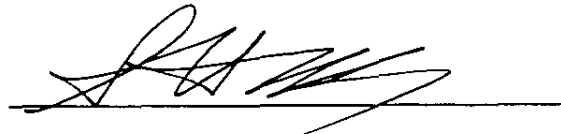
Life Connectors, Inc., a Florida not for profit corporation

By: 

David E. Wilkins
Its President

STATE OF FLORIDA
COUNTY OF LEON

THE FOREGOING INSTRUMENT was acknowledged before me this 23 day of January, 2014, by David E. Wilkins, President of Life Connectors, Inc., a Florida not for profit corporation, on behalf of the corporation, ☒ who is personally known to me or ☐ who has produced a Florida drivers license as identification.



[Printed Name] _____
Notary Public, State of Florida
My Commission expires:

[Notarial Seal]

