	Florida Department of State Division of Corporations Electronic Filing Cover Sheet
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	H160001112573ABCY Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
	To: Division of Corporations Fax Number : (850) 617-6380
	From: Account Name : LEGALZOON.COM INC. Account Number : I20010000062 Phone : (323)962-8600
	Fax Number : (323)962-3869
**E	Fax Number : (323)962-3889
≠≠E	nter the email address for this business entity to be used for future

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Electronic Filing Menu Corporate Filing Menu

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Help

To: Page 3 of 6

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5/4/2016 7:56:13 AM PDT

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13239628300 From: Amanda Sando

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COVER LETTER To: Amendment Section Division of Corporations IMAGE OF CORPORATION: THE LINK CENTER MIAMI INC. NAME OF CORPORATION: THE LINK CENTER MIAMI INC. DOCUMENT NUMBER: M16000002201 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Imtelde Vasquez (Name of Company) Legalzoom.com, Inc. (Firm/ Company) DOL N Brand Blvd., 11th Floor (Address) Glendele, CA 91203 (Cory State and Zip Code) Engl address: (to be used for future annual report notification) For further information concerning this matter, please call: Matter dot description of States colspan="2">Contified Copy (Matter of States Certificate of States Certificate of States Certificate of States Certificate of States Certificate of States Certificate Copy (Matter of Corporations ProBox 6377 Tallabasese, FL 32314						
TO: Amendment Section Division of Corporations NAME OF CORPORATION: THE LINK CENTER MIAMI INC. NAME OF CORPORATION: THE LINK CENTER MIAMI INC. NAME OF CORPORATION: THE LINK CENTER MIAMI INC. DOCUMENT NUMBER: N16000002201 The enclased Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Imelda Vasquez (Name of Contact Person) Legalzoom.om. Inc. (Firm/ Company) 101 N Brand Blvd., 11th Floor (Address) Glendele, CA 91203 (City/ State and Zip Code) thelinkcentermiami@gmail.com E-mail address: (to be tased for future annual report notification) For further information concerning this matter, please call: Imelda Vasquez (Mane of Contact Person) Enclosed is a check for the following amount made psyable to the Florida Department of State: State State State States Certificate of Status Certificate of Status Certificate of Status Certificate of Status Mailing Address P.O. Box 6327 Talabases, FL 32314 State State State Contex Certor Circle	0	14. 14. 14.				
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	Articles	of Amendment		
	Articles	to of Incorporation		<u> </u>
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THE LINK CENTER MI				
(Name of Corporation as current	ly filed with the Flor	ida Dept, of State)		
N16000002201	· · · · · · · · · · · · · · · · · · ·			<u>+</u>
(Doc	sument Number of Con	rporation (if known)		-
ursuant to the provisions of section 617, mendment(s) to its Articles of Incorpora		, this Florida Not For Pr	ofit Corporation (sdopts the following
. If amending name, enter the new n	ime of the corporatio	<u>אן:</u>		CO The new
ame must be distinguishable and contai Company" or "Co," may not be used in		on" or "incorporated" of	the abbreviation	
Enter new principal office address				
rincipal office address <u>MUST BR A S</u>	TREET ADDRESS)			
.			·	
 Enter new mailing address, if apple (Mailing address MAY BB A POST) 			·	
	•			,
. If amending the registered agent as new registered agent and/or the ner			er the name of th	¢
<u>Name of New Registered Agent:</u>				
		Florida street address)		
New Registered Office Address				
			_, Florida	<u></u>
	(City)			(Zip Code)
ew Registered Agent's Signsture, if c hereby accept the appointment as regist			obligations of the	position.
	Signature of New R	cegistered Agent, if chang	ing	
	P	age 1 of 4		

4 Page 5 of 6 5/4/2016 7:56:13 AM PDT 13239628300 From: Amanda Sando To: 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) (Aluen autinonal speed, 9 measury) 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 = ChiefExecutive 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>рт</u> У X Change John Doe X Remove Mike Jones X Add ŝv Sally Smith Type of Action Title Name Address (Check One) WENDI BOSWORTH 8004 NW 154 STREET #401 SD 1) ____ Change MIAMI LAKES, FL 33016 ___ Add X Remove **RALPH PADRON** 8004 NW 154 STREET #401 TD 2) ____ Change MIAMI LAKES, FL 33016 Add Х Remove PTSD JULIE PADRON 8004 NW 154 STREET #401 3) X Change MIAMI LAKES, FL 33016 _ Add _ Remove 4) _____ Change _ Add ___ Remove Change __ Add ____ Remove 6) _____ Change ____ Add Remove Page 2 of 4

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• The date of cach amendment(s) adoptio date this document was signed.	e:	
Effective date if applicable:		
Effective date <u>it epopletivje</u> .	(no more than 90 days after amendment file dute)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	
There are no members or members en adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
Dated 4-26	-2016	
Signature Chilie	Cadrin	
(By the chairman of have not been sel	r Vice clisingen of the board, president or other officer-if directors seted, by an incorporator — if in the hands of a receiver, trustee, or ited fiduciary by that fiduciary)	
JULIE PADRO		
	ed or printed name of person signing)	
PRESIDENT	(Title of person signing)	
	(23mc of branch, organiz)	