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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 3000 CC	vast Solo	ar Flares	INC.
DOCUMENT NUMBER: N170000	3228	•	
·	-		
The enclosed Articles of Amendment and fee are submitted	ed for filing.		
Please return all correspondence concerning this matter to	the following:		
Julia M France	O		
(Na	ame of Contact Pers	on)	
Space Cuast Solar	Flares	INC.	
·	(Firm/ Company)	•	
11000 W Eau Gallin	Blvd.	Suite à	205-J
·	(Address)		
Melbourne, FC =	32935		
(Ci	ty/ State and Zip Co	de)	
Pacecoast Solar Flaces @ Somail. Com E-mail address: (to be used for future Innual report notification)			
		i notification)	
For further information concerning this matter, please call	:		
Julia M Franco	at		3242-
(Name of Contact Person)	(4	Area Code) (Daytime T	relephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:			
(,	43.75 Filing Fee & Certified Copy Additional copy is enclosed)	Certificate of Statu Certificate Copy (Additional Copy i Enclosed)	
Mailing Adduses	Stanz	t Address	

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 Articles of Incorporation of

Space Charle Solar I C	ares Inc.	_
(Name of Corporation as curren	ently filed with the Florida Dept. of State)	
<u>N1700003</u>		
(Document Numb	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the followi	ng
A. If amending name, enter the new name of the corporat	tion:	
	The ne	
name must be distinguishable and contain the word "corpora "Company" or "Co," may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc	,
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	1000 N Eau Gallie BI	vd
	JUGE 2015-1	_
	Melbourne, FL 32435	<u>></u>
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	1600 W Eau Gallic Bl	101
	Suite 205-J	_
	Melbourne, FC 3293'	5 -
D. If amending the registered agent and/or registered offi		
	ice address in Florida, enter the name of the	
new registered agent and/or the new registered office a		
		
new registered agent and/or the new registered office a		
new registered agent and/or the new registered office and and/or the new registered office and/or the new registered office and/or the new registered office an		-
new registered agent and/or the new registered office a	address:	
new registered agent and/or the new registered office and and/or the new registered office and/or the new registered office and/or the new registered office an	address: (Florida street address) , Florida	- -
new registered agent and/or the new registered office and and/or the new registered office and/or the new registered office and/or the new registered office an	address: (Florida street address)	-
new registered agent and/or the new registered office s Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered	(Florida street address)	
new registered agent and/or the new registered office s Name of New Registered Agent: New Registered Office Address:	(Florida street address)	
new registered agent and/or the new registered office s Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered	(Florida street address)	-
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	(Florida street address)	-
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	(Florida street address) (Florida street address) , Florida (City) (Zip Code) d Agent: amiliar with and accept the obligations of the position. Signature of New Registered Agent, if changing	
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	(Florida street address) (Florida street address) , Florida (City) (Zip Code) d Agent: amiliar with and accept the obligations of the position. Signature of New Registered Agent, if changing	
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	(Florida street address) (Florida street address) , Florida (City) (Zip Code) d Agent: camiliar with and accept the obligations of the position. Signature of New Registered Agent, if changing LARTARY ASSRY Page 1 of 4	
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	(Florida street address) (Florida street address) , Florida (City) (Zip Code) d Agent: amiliar with and accept the obligations of the position. Signature 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:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. \ If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD$.

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. Remove X. Add	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	3	Juson Jones	231 Prairie St 8E Palm Bay, A 32909
2) Change Add	3_	Walter Bailey III	231 Prairie Dt SE Palm Bay, Ft.
Remove 3) Change Add	I	Angela lombardo	3647 Cappio Dr Mrlbourne, FL
Remove 4)ChangeAddRemove			33940
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if necessary	y. (Be specific)			
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	e date of each amendment(s) adoption: 4/201+ e this document was signed.	, if other than th
Effe	fective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will cument's effective date on the Department of State's records.	not be listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
Ø	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 4.18.17	
	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)	
	(Typed or printed name of person signing)	
	President (Title of person signing)	