## N/7000003860

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: LINK of Brevard, Inc.
DOCUMENT NUMBER: N 1 7 0000 3860
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
J. Lexi Goza
(Name of Contact Person)
LINK of Brevard, Inc. (Firm/Company)
2263 West New Haven Avenue, #136
(Address)
Melbournes th 32-904
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lexi Guza 3216982974
(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 Status Certificate of Status (Additional copy is enclosed)  \$35 Filing Fee Certificate of Status    \$43.75 Filing Fee Certified Copy (Additional Copy is Enclosed)    \$35 Filing Fee Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

	of	
LINK of Br	revard. Inc.	
	ly filed with the Florida Dept. of State)	
N 17 00000 386	> O	
	r of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the	of following
A. If amending name, enter the new name of the corporation	- N/B	The new
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbreviation "Corp."	or "Inc."
Company of Co, may not be used in the name.	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	70 / 13	0 8
,		2 -
	<u> </u>	
C. Entenment - West Admired Complete Vision	SS	္ က်
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A ==	<u> </u>
		<u>်</u> ကြ
	7	
		,
D. If amending the registered agent and/or registered office		•
new registered agent and/or the new registered office ad	Idress:	
Name of New Registered Agent:	N/A	<del></del>
New Registered Office Address:	(Florida street address)	
	N/A , Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, If changing Registered A I hereby accept the appointment as registered agent. I am fam		
	NIA	
Sig	nature 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 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

Exam <u>X</u> Cl <u>X</u> Re <u>X</u> A	nange emove	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type (Chee	of Action k One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1)	Change	~* ·			
	Add				
	Remove				
2)	Change		_		
_	Add				<u>.                                    </u>
	Remove		<b>.</b>	•	
3)	Change				
	Add				
_	Remove				
4) _	Change	<del></del>	<del>.</del>	· · · · · · · · · · · · · · · · · · ·	
	Add				
	Remove				
5) _	Change				
	Add	•			<del></del>
	Remove				
6) <u> </u>	Change		<del>-</del>		
	Add				
	Remove				

(attach additional sheets, if necessary). (Be specific)
Change name of President to
Change name of President to J. Lexi Goza
From
from Michael Bloom address remains the same
address remains the same

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 91) days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
have not been	Seving Gross of the board, president or other officer-if directors a selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
	J. Lexi Goza/Mich (Typed or printed name of person signing)	ael Bloor
	President/Regist	ered Agent