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Office Use Only

### COVER LETTER

TO: Amendment Section
Division of Corporations

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Space Coast Punishers LEMC INC.	
N21000001296 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the followin	g:
Brian Carroll	
(Name of Conta	ct Person)
Space Coast Punishers LEMC INC.	
(Firm/ Com	pany)
387 Brookcrest Circle	
(Addres	s)
Rockledge, FL 32955	s) Zip Code)
(City/ State and	Zip Code)
bcarroll682@gmail.com	
E-mail address: (to be used for future annua	I report notification)
For further information concerning this matter, please call:	
Brian Carroll	321 403-0337
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Flor	ida Department of State:
S35 Filing Fee □S43.75 Filing Fee & □S43.75 Filing Certificate of Status Certified Copy (Additional co enclosed)	y Certificate of Status ppy is Certified Copy
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

Space Coast Punishers LEMC INC.

#### (Name of Corporation as currently filed with the Florida Dept. of State)

N21000001296

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

#### A. If amending name, enter the new name of the corporation:

			The new
name must be distinguishable and contain the word "co "Company" or "Co," may not be used in the name.	prporation" or "incorporated	' or the abbreviation "Corp.	" or "Inc."
B. Enter new principal office address, if applicable:	387 Brookcrest Circle		
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u> ) Rockledge, FL 32955		
C. Enter new mailing address, if applicable:			_
(Mailing address MAY BE A POST OFFICE BO)	$\underline{\mathbf{v}}$ = $\frac{387 \text{ Brookcrest Circle}}{2}$	<u> </u>	
	Rockledge, FL 32955		
			RE DE
D. If any dire the project and another down register	ad office address in Florida .	ontor the name of the	الم الله الله الم
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		encer the name of the	
	an Carroll		······································
	7 Brookcrest Circle		
	(Flo	rida street address)	
<u>New Registered Office Address</u> :			
Ro	ckledge	, Florida	5
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regi	stered Agent:		

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Bu Cand 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 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>X</u> Change <u>X</u> Remove <u>X</u> Add	$\underline{V}$ <u>Mil</u>	n Doe se Jones ly Smith	
<u>Type of Action</u> (Check One)	<u>_Title</u>	<u>Name</u>	Address
1) Change Add	<u>SRC</u>	Robert Manning	1221 Wakefield RD SE       Palm Bay, FL 32909
<ul> <li><u>×</u> Remove</li> <li>2) <u>Change</u></li> <li>Add</li> </ul>	<u>P</u>	Jesus Ortega	1116 Johnston RD SE Palm Bay, FL 32909
x Remove 3) X Change Add Remove	<u>P</u>	Brian Carroll	387 Brookcrest Circle Rockledge, FL 32955
4) <u>Change</u> <u>x</u> Add	VP	Edward Eubank	Melbourne, FL 32901
Remove 5) Change <u>×</u> Add	<u>r</u>	Robert Shields	3070 Ranch Road Melbourne, FL 32904
6) Remove 6) Change Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (attach additional sheets, if necessary). (Be specific)

Robert B Manning (SRC) and Jesus Ortega (P) have left the Space Coast Punishers LEMC INC as of 11/15/2024.

Brian Carroll was voted in as President, Edward Eubank was voted in as Vice President on 11/15/2024.

Robert Shields is being added as Treasurer.

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		SECRETARY OF ALL
The date of each amendment date this document was signed	11/15/2024	
The date of each amendment	(s) adoption:	, if other than the
date this document was signed		
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Effective date <u>if applicable</u> :	11/15/2024	
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

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	11/20/2024	
Signature	B- Call	
Signature	(By the chairman or vice chairman of the board, presic	

(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)

Brian Carroll

(Typed or printed name of person signing)

President

(Title of person signing)

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