

N23000003998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

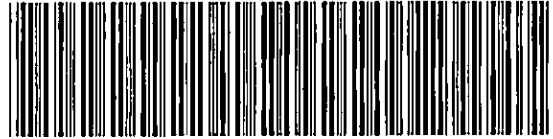
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2022 JUN 20 PM 10:40

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TALLAHASSEE, FL

FILED

23

COLE LINK FOUNDATION CORPORATION  
2754 SUNSET POINT ROAD, CLEARWATER, FLORIDA 33759  
727-466-1761

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March 16, 2023

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

Dear New Filing Reviewer,

Attached please find the Not For Profit Articles Of Incorporation and the By-Laws and the Authorization Letter from previous owner of the name "Cole Link Foundation Corporation", allowing me to use the same name, but we wish to have a new Florida assigned Doc. Number to us, and I have also included the IRS new EIN number assigned to us for this purpose and for your records.

The required fees in the amount of \$78.75 is also enclosed with this letter.

Please expedite issuing registration and certificates to us as soon as possible as we could not do this online. Please mail back to my name all that you will be approving and sending to us to the address noted above. Should you need to reach out to me please call me at 727-466-1761.



Thank you.

Kind regards,

Kamran Rouhani, Registered Agent

CC: File

2023 MAR 22 PM 10:40  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE

Myra J Baucom  
4522 Edinburg Drive Tyler, Tx 75703  
727-678-9392 jolynn1005@gmail.com



February 10, 2023

Kamran Rouhani  
2754 Sunset Point Rd  
Clearwater, FL 33759

Dear Kamran Rouhani,

This letter is to give permission and authorize you, Kamran Rouhani to take over the operations and obligations as of 2/10/2023 of the Cole Link Foundation. You are not responsible for any past fees nor obligations. The Cole Link Foundation Corp. filed in the state of Florida N14000010734 and the FEI/EIN Number 47-2369893 as a 501 (C) (3) Nonprofit Organization.

Kamran we are pleased to know that the Cole Link Foundation will resume under your care and guidance.

Sincerely,

*Myra J. Cole Baucom*

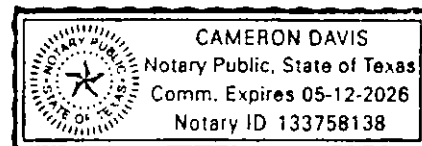
Myra J. Cole Baucom

Founder/Chairwoman

Cole Link Foundation

State of Texas  
County of Smith  
Sworn to and subscribed before me on  
the 23rd day of February, 2023.

Notary Signature  
My Commission Expires May 12th, 2026



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MAR 20 PM 10:40  
CLARK COUNTY, FL



## COVER LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** COLE LINK FOUNDATION CORPORATION  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: KAMRAN ROUHANI  
Name (Printed or typed)  
2754 SUNSET POINT ROAD,  
Address  
CLEARWATER, FLORIDA 33759  
City, State & Zip  
727-466-1761  
Daytime Telephone number

K.ROUHANI@AEC-INC.COM

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

**NOTE: Please provide the original and one copy of the articles.**

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2023 MAR 20 PM 10:41  
DIVISION OF STATE  
TALLAHASSEE, FL

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: COLE LINK FOUNDATION CORPORATION

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
2754 SUNSET POINT ROAD,

CLEARWATER, FLORIDA 33759

Mailing address, if different is:

SAME

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: EDUCATION, SKILL DEVELOPMENT, SOCIAL BEHAVIOR, AND  
ETHICAL TRAINING, OF YOUNG AND OLD, SINGLE MOMS, VETERANS, REFUGEES, LESS FORTUNATE, SPECIAL  
NEEDS PEOPLE AND COMMUNITY EDUCATION DEVELOPMENT.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: VOTING SYSTEM

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: DORI AVAREGAN, PRESIDENT

Address: 2754 SUNSET POINT ROAD,  
CLEARWATER, FLORIDA 33759

Name and Title: SHERYL PRINDLE, TREASURER

Address: 2754 SUNSET POINT ROAD,  
CLEARWATER, FLORIDA 33759

Name and Title: CARMEN LAKE, VP

Address: 2754 SUNSET POINT ROAD,  
CLEARWATER, FLORIDA 33759

Name and Title: MARC LAVETT, SECRETARY

Address: 2754 SUNSET POINT ROAD,  
CLEARWATER, FLORIDA 33759

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

VOTING SYSTEM

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: KAMRAN ROUHANI, AGENT  
Address: 2754 SUNSET POINT ROAD,  
CLEARWATER, FLORIDA 33759

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: KAMRAN ROUHANI, AGENT  
Address: 2754 SUNSET POINT ROAD,  
CLEARWATER, FLORIDA 33759

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TALLAHASSEE, FL  
STATE

**ARTICLE VIII EFFECTIVE DATE:**

APRIL 01, 2023

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**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.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Required Signature of Registered Agent

03-16-2023

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Required Signature of Incorporator

03-16-2023

Date

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: KAMRAN ROUHANI, AGENT  
Address: 2754 SUNSET POINT ROAD,  
CLEARWATER, FLORIDA 33759

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: KAMRAN ROUHANI, AGENT  
Address: 2754 SUNSET POINT ROAD,  
CLEARWATER, FLORIDA 33759

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: APRIL 01, 2023. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**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.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:*

  
\_\_\_\_\_  
Required Signature of Registered Agent

03-16-2023

\_\_\_\_\_  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
\_\_\_\_\_  
Required Signature of Incorporator

03-16-2023

\_\_\_\_\_  
Date

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TALLAHASSEE, FL