

PD7000046326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

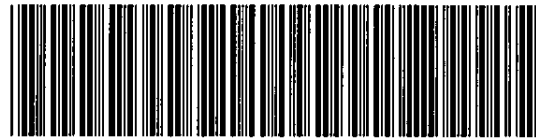
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Amend / CC  
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@ 8.31.07



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08/15/07--01013--019 \*\*52.50

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 AUG 30 AM 11:29

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: COASTAL LINEN SERVICES OF BREVARD, INC.

DOCUMENT NUMBER: PO7000046326

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAGALIE POMPEE AUGUSTE  
(Name of Contact Person)

COASTAL LINEN SERV OF BREVARD, INC  
(Firm/ Company)

727 North DR Suite I-85  
(Address)

MELBOURNE FL 32934  
(City/ State and Zip Code)

For further information concerning this matter, please call:

MAGALIE POMPEE AUGUSTE at (321) 255-1934  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 20, 2007

MAGALIE P. AUGUSTE  
727 N. DR., SUITE I & J  
MELBOURNE, FL 32934

SUBJECT: COASTAL LINEN SERVICES OF BREVARD, INC.  
Ref. Number: P07000046326

We have received your document for COASTAL LINEN SERVICES OF BREVARD, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton  
Document Specialist

Letter Number: 407A00050416

RECEIVED  
2007 AUG 30 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

COASTAL LINEN SERVICES OF BREVARD, INC.  
(Name of corporation as currently filed with the Florida Dept. of State)

P070000 46326

(Document number of corporation (if known))

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 AUG 30 AM 11:29

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

N/A

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  
(A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

Adding OFFICER  
MR. ROBERT AUGUSTE AS Vice President  
OF COASTAL Linen SERVICES OF BREVARD, INC  
727 North DR Ste I & J Melbourne FL, 32934

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 8/28/07

Effective date if applicable: 8/28/07  
(no more than 90 days after amendment file date)

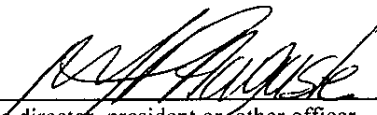
Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_."  
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signature

  
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MAGALIE POMPETE AUGUSTE  
(Typed or printed name of person signing)

OWNER  
(Title of person signing)

FILING FEE: \$35