717000077501

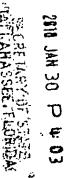
(R	requestor's Name)	
(A	ddress)	
(A	ddress)	<u> </u>
(C	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(0	Occument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer:	
Special Instructions to	o Filing Officer:	

Office Use Only



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JAN 3 1 2018 T. LEBHETT



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SilverLink Consult	ing, Inc.	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	binitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Michael Saffy		
		Name of Contact Person	1
	SilverLink Consulting, Inc.		
		Firm/ Company	
	7004 Altama Rd	. ,	
		Address	
	Jacksonville/ FL 32216		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	<u> </u>
. 1	10.71 17.15 1.16		
	iel@silverlinkconsulting.com	15. 6.	
	n-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Michael Saffy		904 at (629-7805 de & Daytime Telephone Number
Name e	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ertment of State:
□ \$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)
	ling Address		Address
	Amendment Section Amendment Section		
	sion of Corporations Box 6327	Division of Corporations Clifton Building	
	nhassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301



December 21, 2017

MICHAEL SAFFY 7004 ALTAMA RD JACKSONVILLE, FL 32216

SUBJECT: SILVERLINK CONSULTING, INC.

Ref. Number: P17000077501

We have received your document for SILVERLINK CONSULTING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

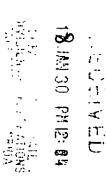
The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 917A00025876



Articles of Amendment to Articles of Incorporation of

EILED

SilverLink Consulting, Inc.			•
	of Corporation as curre	ntly filed with the Florida De	pt. of State JAN 30 P & 03
P17000077501			SECRE-MARY HE STATE
	(Document Number	of Corporation (if known)	SECRETARY OF STATE
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation a	adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
N/A			Th.,
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," or	"Co". A professional corpor	The new porated" or the abbreviation ration name must contain the
B. Enter new principal office address,	if annlicable:	N/A	
(Principal office address MUST BE A S			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
			
If amending the registered agent ar new registered agent and/or the ne			me of the
	N/A	33.	
Name of New Registered Agent			
	N/A		
		street address)	
New Registered Office Address:	N/A		_, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if c			
I hereby accept the appointment as regist	tered agent. I am familiai	r with and accept the obligation	ns 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 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	T,D	Lily Sanchez	7004 Altama Rd
Add X Remove			Jacksonville FL 32216
2) Change	S.D	Amber Luke	7004 Altama Rd
Add			Jacksonville FL 32216
Remove 3) Change	S, T	Michael Saffy	7004 Altama Rd
X Add Remove			Jacksonville FL 32216
4) Change Add Remove			
5) Change Add			
Remove			
Add Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	eles, enter change(s) here: (Be specific)
N/A	toe openation
IN/A	
	
- · · · · · · · · · · · · · · · · · · ·	
	
F If an amendment provides for an evel-	inge, reclassification, or cancellation of issued shares,
provisions for implementing the amen	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
	ember 15th, 2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	 _
	(no more man >11 days after amenament fre date)	
Note: If the date inserted in this bedocument's effective date on the Do	block does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated Signature	irector, president or other officer – if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ted fiduciary by that fiduciary)	
	Michael Saffy	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	