

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM643188

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
JD Links Solutions Inc.		01/22/2021	Corporation: FLORIDA
RECEIVING PARTY DATA			
Name:	JD Links Inc.		
Street Address:	19635 NE 23rd Avenue		
City:	Miami		
State/Country:	FLORIDA		
Postal Code:	33180		
Entity Type:	Corporation: FLORIDA		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Serial Number:	90001329	SOUPFICIENT	
Serial Number:	90001333	BETTER NUTRITION BY THE SPOONFUL	
CORRESPONDENCE DATA			
Fax Number:	3054466191		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
Phone:	3054487089		
Email:	teas@lottfischer.com		
Correspondent Name:	Ury Fischer		
Address Line 1:	P.O. Box 141098		
Address Line 4:	Coral Gables, FLORIDA 33114-1098		
ATTORNEY DOCKET NUMBER:	10060.8000		
NAME OF SUBMITTER:	Ury Fischer		
SIGNATURE:	/Ury Fischer/		
DATE SIGNED:	04/29/2021		
Total Attachments: 6			
source=2021.01.22 - Amendment to Articles of Inc#page1.tif			
source=2021.01.22 - Amendment to Articles of Inc#page2.tif			
source=2021.01.22 - Amendment to Articles of Inc#page3.tif			
source=2021.01.22 - Amendment to Articles of Inc#page4.tif			

OP \$65.00 90001329

source=2021.01.22 - Amendment to Articles of Inc#page5.tif

source=2021.01.22 - Amendment to Articles of Inc#page6.tif

P14 000075662

(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



900358984789

01/28/21--01010--014 **35.00

FILED
2021 JAN 28 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FL

TRADEMARK
REEL: 007274 FRAME#0523

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JD Links Solutions Inc

DOCUMENT NUMBER: P14000075662

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

Please return all correspondence concerning this matter to the following:

Jay Borsky
Name of Contact Person

Jay Borsky PA
Firm/ Company

1498 Jefferson Ave STE 508A
Address

Miami Beach, FL 33139
City/ State and Zip Code

jayborsky@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jay Borsky at (305) 904-9777
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
- \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

JD Links Solutions Inc

(Name of Corporation as currently filed with the Florida Department of State)

P14000075662

(Document Number of Corporation (if known))

FILED
2021 JAN 28 AM 8:29
SECRETARY OF STATE
TALLAHASSEE, FL

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

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

JD Links Inc

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change	<u>VP</u>	<u>Dan Sragovicz</u>	<u>19635 NE 23rd Ave</u>
<input type="checkbox"/> Add			<u>Miami, FL 33180</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>P</u>	<u>Djamille Cohen Sabbaj</u>	<u>19635 NE 23rd Ave</u>
<input checked="" type="checkbox"/> Add			<u>Miami, FL 33180</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an 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)

01/22/2021

The date of each amendment(s) adoption: _____ if other than the date this document was signed.

01/22/2021

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 incorporators, or board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted 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)"

01/22/2021
Dated _____

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)

Dan Sragovicz

(Typed or printed name of person signing)

Vice President

(Title of person signing)