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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATI	The Friends of The ON:	eatre Inc.		
DOCUMENT NUMBER:	724317			
The enclosed Articles of Articles		mitted for filing	· · · · ·	
·		Ť		
Please return all correspond	ence concerning this matt	er to the following:		
SHELDON B PALLEY				
		(Name of Contact I	erson)	
				-
		(Firm/ Compan	ıy)	
1497 NW 7th STREET				
		(Address)	,	
MIAMI, FL 33125				
		(City/ State and Zip	Code)	
sbpalley@outlook.com				
	-mail address: (to be used	for future annual re	nort notificatio	n\
For further information con-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,
Sheldon B Palley		ລ	305 1	642-0592
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	yable to the Florida	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
Mailing /	Address ent Section		reet Address	ion
	of Corporations		mendment Sect ivision of Corpo	
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FRIENDS OF THEATRE, INC. THE

Name of Corporation as currently filed with th	e Florida Dept. of State)	
Document #: 72	4317	
(Document)	ment Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For Prof	It Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
		The new
name must be distinguishable and contain the wor Company" or "Co." may not be used in the nam		he abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applications of the principal office address MUST BE A STREET A		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	
If amending the registered agent and/or registered agent and/or the new registe		the name of the
Name of New Registered Agent:	Sheldon B. Palley	
Name of New Registered Agent.	1497 NW 7th Street, Miami, FL 331	25
New Registered Office Address	,	reet address)
	1497 NW 7th Street, Miami	, Florida 33125
	(City)	(Zip Code)
New Registered Agent's Signature, if changing		
hereby accept the appointment as registered agei	nt. I am familiar with and accept the <u>ob</u>	ligations of the position.
	17.61.0	HAR STATE OF THE S
•	(Signature of New-Registered A	gent of changing 30

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 X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>PD</u>	Naomi McKinney	3618 SW 57 Avenue Miami, FL 33155
 X Remove 2) Change Add 	<u>PD </u>	Patricia Clarke	1001 Sunset Drive Miami, FL 33134
X Remove 3) Change Add × Remove	<u>VPD</u>	Joanne Estaver	9221 SW 69th Court Pinecrest, FL 33156
4) Change Add	<u>PD </u>	Thor W Bruce	3252 Riviera Dr Coral Gables, FL 33134
Remove 5) Change × Add Remove	<u>VD</u>	Myna Palley	8365 SW 91st Street Miami, FL 33156
6) Change Add	<u>vo</u>	Sandra Hutchinson	3 Grove Isle #1208 Miami, FL 33133
Remove E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

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.

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Example: X Change X Remove A Add	PT John Do V Mike Jo SV Sally Sn	ne <u>s</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change X Add Remove	<u>VD</u>	Carol Newport	10775 N Bayshore Dr Miami, FL 33165
2) Change Add	<u>SD</u>	Margaret Sarafoglu	6201 SW 118 St Miami, FL 33156
Remove 3) Change × Add Remove	SD	Peggy Vital	343 Majorca Ave Coral Gables, FL 33134
4) Change Add	D/Liaison	Camille King	11140 SW 71 Ave Pinecrest, FL 33156
Remove 5) Change	D/Liaison	Henry Langston	9350 S. Dixie HWY - 11th Floor Miami, FL 33156
Remove 6) Change Add	<u>RA</u>	Kent Lantaff	1231 Dickenson Dr Coral Gables, FL 33124
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

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Pho data of analy amount of the state of the	2/1/20 2/1/20	
The date of each amendment(s) adoption: late this document was signed.		, if other than the
	2/1/20	
Effective date if applicable:	1/1/20	
(no mo	ore than 90 days after amendment file date)	
Note: If the date inserted in this block does not a	meet the applicable statutory filing requirements, t	this date will not be listed as the
In a control of the c	Process of the state of the sta	and date will not be mated 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 $\frac{3}{18/20}$
Signature State 199
(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)
Sholdow B Palley
(Typed or printed name of person signing)
TREASURAN & DIRACTOR & Recision and A Grant
(Title of person signing)