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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION		of Dance Inc.		
DOCUMENT NUMBER:	N1400000)6356		
The enclosed Articles of Am		mitted for filing.		
Please return all corresponde	ence concerning this matt	er to the following:		
	Ka	rina G. Felix		
		(Name of Contact Per	son)	
	Aff	idian Inc		
* "		(Firm/ Company)		
	1310	Isleworth Court		
		(Address)		·
	Royal P	alm Beach, Florida, 33	411	
		(City/ State and Zip C	ode)	
	Affidia	nInc@gmail.com		
E	-mail address: (to be use	d for future annual repo	ort notificatio	n)
For further information conc	erning this matter, please	call:		
Karina Felix		at	561	317.8751
	(Name of Contact Persor		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made p	ayable to the Florida D	epartment of	State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif (Addi	0 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing A	ddress		et Address	ion

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

Visionaries of Dance Inc.

(Name of Corporation as currently filed with the	e Florida De	ent. of State)		
N14000006356		,		
(Docum	nent Number	of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florida Not Fo</i>	or Profit Corporation adopts th	e following
A. If amending name, enter the new name of the	e corporatio	on:		
Visionaries in Motion Inc.		The new		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		on" or "incorporated	d" or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applica		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or reginew registered agent and/or the new registered	stered office	N/A address in Florida dress:	enter the name of the	2020 JAN 110 LT
Name of New Registered Agent:	N/A			
	N/A		lorida street address)	
New Registered Office Address:	N/A	V	N/A	
		(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ager	Registered A nt. I am fam	Agent: iliar with and accept	t the obligations of the position	
-	Sig	nature of New Regist	tered 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 X Remove X Add	PT John Do V Mike Jo SV Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change X Add	VP	Ruth Torres	2292 Heritage Greens Drive Naples, Florida, 34119
Remove 2) Change X Add	<u> </u>	Natasha Felix	765 Amsterdam Ave 15D NYC, NY, 10025
Remove 3) X Change Add Remove	<u>T</u>	Sergio Fedele	1310 Isleworth Court, RPB, FL, 33411
4) Change Add	<u> </u>	Kiara Fedele	1310 Isleworth Court, RPB, FL, 33411
Remove 5) Change Add			
Remove 6) Change Add			
Remove		Page 2 of 4 icles, enter change(s) here: (Be specific)	
Purpose of this organizat	ion:		
This corporation is a non	profit public benef	fit corporation and is not organized for the pri	vate gain of any person.
It is organized under the	Nonprofit Public I	Benefit Corporation Law for charitable purpo	ses.
The specific purposes for	r which this corpo	ration is formed are exclusively charitable w	thin the meaning of
Section 501(c)(3) of the	Internal Revenue (Code of 1986.	

It's purpose is the advancement of education	n, career skills enhancement and general wellbeing,	
		
		
		<u>.</u>
		
		
		
		
	Page 3 of 4	
The date of each amendment(s) adoption date this document was signed.	:, it	other than the
Effective date if applicable:	January 15, 2020	
	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will not be lint of State's records.	sted as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

Dated January 15, 2020
Signature
(By the chairman of 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)
Karina Felix
(Typed or printed name of person signing)
President
(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.