567614

| (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: | | | |
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Office Use Only



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Frend

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | Dussich Dance S | tudio, Inc | | | |
|---|---|---------------------------------------|------------------|---|--|
| DOCUMENT NUM | 1BER: 567614 | | | | |
| | es of Amendment and fee are su | bmitted for fill | ing. | | |
| Please return all corr | respondence concerning this ma | uer to the follo | owing: | | |
| | Anna Spangler | | | | |
| | | Name of C | ontact Persor | 1 | |
| | Dussich Dance Studio, Inc | | | | |
| | | Firm/ 0 | Company | . | |
| | 125 Imperial Street | | • • | | |
| | | Ad | dress | | |
| | Merritt Island, FI 32952 | | | | |
| | | City/ State | and Zip Cod | c | |
| Dus | ssichdancestudio@gmail.con | n | | , | |
| | E-mail address: (to be us | | innual report | notification) | |
| | | | • | · | |
| For further informati | on concerning this matter, pleas | se call: | | | |
| Anna Spangler | | at : | 321 | 412-5541 | |
| Nami | e of Contact Person | | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check | for the following amount made [| payable to the | Florida Depa | artment of State: | |
| □ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | Certified (Additional enclosed) | al copy is | ☐S52.50 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 | | | Amend Divisio | Address Iment Section on of Corporations Building | |
| | | 2661 Executive Center Circle | | | |

Taliahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Dussich Dance Studio, Inc.

| (Name | of Corporation as curren | tly filed with the Florida De | pt. of State) | |
|--|---------------------------------------|--|-----------------------------|------------|
| 567614 | | | | |
| | (Document Number of | of Corporation (if known) | | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | 1006, Florida Statutes, this | Florida Profit Corporation | adopts the following amendn | ient(s) to |
| A. If amending name, enter the new n | ame of the corporation: | | | |
| | | · | The ne | |
| name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | nation "Corp." "Inc," or | "Co". A professional corpe | | |
| B. Enter new principal office address. | if applicable: | | | |
| (Principal office address MUST BE A S | TREET ADDRESS) | | | |
| | | | <u> </u> | |
| | | | <u> </u> | |
| C. Enter new mailing address, if appl | | | 25 25 26 | |
| (Mailing address <u>MAY BE A POST</u> | <u>OFFICE BOX</u>) | | <u> </u> | ED :: |
| | | | | |
| | | | ලාධි ් | ļ. • |
| D. If amanding the registered spart as | id/au movietowod office od | less in Clouds ontouth o | | • |
| D. If amending the registered agent ar new registered agent and/or the ne | | | ame of the | |
| Name of New Registered Agent | Anna Spangler | | | |
| Mark of their regularity region | 125 Imperial Street | | | |
| | · · · · · · · · · · · · · · · · · · · | treet address) | | |
| New Registered Office Address: | Merritt Island | | 32952 . Florida | |
| New Registered Office Matters. | | (City) | (Zip Code) | |
| | | | | |
| | | | | |
| New Registered Agent's Signature, if c I hereby accept the appointment as regis. | | | ons of the position. | |
| approximation and approximation and account | area agein. | and accept the soring | one of the following | |
| | 105 | /. | | |
| | Signature of Few | MNAI] Registered Agent, if changing | | |
| | Signature of Yew | Regisjered 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 | <u>PT</u> | John Doe | | |
|----------------------------|-----------------------------|--------------------|--------------------------|--|
| X Remove | $\underline{\underline{V}}$ | Mike Jones | | |
| X Add | <u>SV</u> | Sally Smith | | |
| Type of Action (Check One) | Title | Name | Address | |
| 1) Change | PD | Liz Bevilacqua | 5510 Eagle Way | |
| Add | | | Merritt Island, Fl 32953 | |
| X Remove | | | | |
| 2) Change | VD | Alfred Bevilacqua | 5510 Eagle Way | |
| Add | | | Merritt Island, Fl 32953 | |
| X Remove | | | | |
| 3) Change | STD | Albert S Packard | 2410 S Tropical Trail | |
| Add | | | Merritt Island, Fl 32952 | |
| XRemove | | | | |
| 4) Change | PTD | Anna Spangler | 875 Penny Drive | |
| XAdd | | | Titusville, Fl 32780 | |
| Remove | | | | |
| 5) Change | VSD | Richard Spangler | 875 Penny Drive | |
| X Add | | | Titusville, Fl 32780 | |
| Remove | | | | |
| 6) Change | D | Elizabeth Frinkley | 2360 Polonius Lane | |
| X Add | - | | Melbourne, FI 32934-7634 | |
| Remove | | | | |

| (Attach additional sheets, if necessary | Articles, enter change(s) here: y). (Be specific) | |
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| If an amendment provides for an e- | exchange, reclassification, or cancellation of issued shares, | |
| provisions for implementing the au (if not applicable, indicate N/A) | mendment if not contained in the amendment itself: | |
| 0 Shares Transferred From Liz Bevila | | |
| | | |
| O Shares Transferred From Dussicii D | Dance Studio, Inc to Richard and Anna Spangler | |
| | | |
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| The date of each amendment(s) a | doption: | , if other than the |
|---|---|-------------------------|
| date this document was signed. | | |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this I document's effective date on the De | block does not meet the applicable statutory filing requirements, this date wi epartment of State's records. | Il not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were ad- by the shareholders was/were sa | 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 amendments): | |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | ·· | |
| , | (voting group) | |
| The amendment(s) was/were ad action was not required. | opted by the board of directors without shareholder action and shareholder | |
| ☐ The amendment(s) was/were ad action was not required. | opted by the incorporators without shareholder action and shareholder | |
| | r 24th 2018 | |
| Dated | | |
| Signature / | in Amalacana | |
| (By a c | ircefor, president or other officer - if director or officers have not been | |
| | d, by an incorporator – if in the hands of a receiver, trustee, or other court | |
| appoir | nted fiduciary by that fiduciary) | |
| | Liz Bevilacqua | |
| | (Typed or printed name of person signing) | <u>.</u> |
| | President | |
| | (Title of person signing) | <u> </u> |