

		COVER LETTI	<u>er</u>		
TO: Amendment Section Division of Corporations					
NAME OF CORPORĂTION: MY	nour Do	ine. Th	eater,	Inc	
DOCUMENT NUMBER:	731445				
The enclosed Articles of Amendment a	und fee are submit	ted for filing.			
Please return all correspóndence conce	rning this matter t	o the following:			
	Car	mila Eu			
	(N	ame of Contact Po		,	
	Armour	(Firm/ Company	Theater	r, Inc	
ļi 	5818 8		Street		
		(Address)			
		ami, FL	3314?	3	
		ity/ State and Zip			
E-mail addr	<u>AMIIA</u> (U	AYMOUR	JANC -	org	
For further information concerning this					
Camila Gil		at	33143		67-5543
	Contact Person)		(Area Code)	(Daytime Telep	hone Number)
Enclosed is a check for the following a			-		
	cate of Status (	\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	) Filing Fee cate of Status ed Copy ional Copy is sed)	
<u>Mailing</u> Amendiment Section Division of Corporat	ions	Ār	reet Address nendment Secti vision of Corpe		
P.O. Box(6327 Tallahassee, FL 3231		Th 24	e Centre of T 15 N. Monroc	allahassee 2 Street, Suite 8	10
		Ta	llahassee, FL 3	2303	

Articles of Amendment
to Articles of Incorporation
Armour Dance Theater, Inc (Name of Corporation las currently filed with the Florida Dept. of State)
7318145
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." " "Company" or "Co." may not be used in the name.
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agentland/or the new registered office address:
Name of New Registered Agent: Camila Gil
<u>SQID SW IS STYLE</u> (Florida street address)
<u>New Registered Office Address:</u>
<u>MIAMI</u> , Florida <u>33143</u> (City) (Zip Code)
<u>New Registered Agent's Signature, if changing Registered Agent:</u> <i>Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.</i>
amiladil
Signature of New Registered Agent, if changing

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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; CE() = ChiefExecutive 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 F. 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add		<u>n Doe</u> ke Jones ly Smith	
<u>Type of Action</u> (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove     Change     Add			······
3) Remove Change Add Remove			
4) Change Add	<u> </u>	- <u></u>	
Remove 5) Change Add			
<u></u> Remove 6) Change Add			
E. If amending or ad	ding additional heers, if necessar	Articles, enter change(s) here: v). (Be specific)	

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The date of each amend date this document was si	ment(s) adoption:, if other than t gned.
Effective date <u>if applical</u>	hle:
Note: If the date inserted	in this block does not meet the applicable statutory filing requirements, this date will not be listed as the on the Department of State's records.
Adoption of Amendmen	
	vas/were adopted by the members and the number of votes cast for the amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

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Dated 7/19/21
Signature Dullaluce
(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)
Daniel Lewis
(Typed or printed name of person signing)
President
(Title of person signing)
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