L08000058330

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Registration Section

Tallahassee, FL 32314

TO:

Division of Corporations Bradenton Dance and Performing Arts Center, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Cheryl S Gutner Name of Person Bradenton Dance and Performing Arts Center Firm/Company 2726 6th Ave W Address Bradenton, FL 34205 City/State and Zip Code seavy1110@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Cheryl S Gutner Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$60.00 Filing Fee, □ \$55.00 Filing Fee & ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Bradenton Dance and Performing Arts Center, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Chined)	Jiaomity Company)		
The Articles of Organization for this Limited Liability Company Florida document number L08000058330	were filed on June	12, 2008	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the des	ignation "LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		cords, <u>enter the name</u>	
Name of New Registered Agent:			
New Registered Office Address:			<u>. </u>
	Enter Florid	la street address	
		, Florida	
	•		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agraphics of all statutes relative to the proper and complete			

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			Change
			Add
			Remove
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ote: If the date inserted in this block	does not meet the applic	cable statutory filing i	e than 90 days after filing.) Prequirements, this date w	ill not be listed
cument's effective date on the Depar	ment of State's records	i.		
ecord specifies a delayed effective da is filed.	e, but not an effective t	ime, at 12:01 a.m. on	the earlier of: (b) The	90th day after th
is fried.				
March 12, 2020	12:01 AM			
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