400000 86297

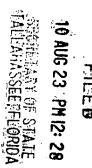
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	: #)
<u></u>	☐ WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
	•	

Office Use Only



100184528791

08/23/10--01011--008 **25.00



S. HAWKES
AUG 2 4 2010
EXAMINER

COVER LETTER

TO:	Registration S Division of Co			
SHRJE	ECT:	DANCER'S E	EDGE STUDIO, LLC	
00201			ited Liability Company	
		Amendment and fee(s) are sul		
1 icasc	return an corresp	ondence concerning this matter	to the following.	
			JENNIFER WATKINS	
			Name of Person	
			Firm/Company	
		3344	TIMBERWOOD CIRCLE	<u> </u>
			Address	
			NAPLES, FL 34105	
		christi	City/State and Zip Code na.robinson@ttpginc.com	1
		E-mail address: (to be used for future annual report no	tification)
For fur	ther information	concerning this matter, please of	call:	
		IFER WATKINS		398-4196
	Name	of Person	Area Code & Dayt	ime Telephone Number
Enclos	ed is a check for t	the following amount:		
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	Sed.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist Divisi P.O. E	LING ADDRESS: ration Section on of Corporations dox 6327 assee, FL 32314	STREET/COUR Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	oorations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DANCE	R'S EDGE STUDIO,	LLC	
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now apperida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liabil		8/17/2010	and assigned
Florida document numberL100008629	<u>7</u> .		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	a limited lighility company he	oro.	
			60 7
	CER'S EDGE STUDIO, I		がない。 With the about
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Com	pany, the designation	"LEG" or the abbreviation
Did to the term of the term of the later			SI SI
Enter new principal offices address, if applicable			一
(Principal office address MUST BE A STREET A	DDRESS)	W 10 10 10	
	•		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.	<u></u>		
B. If amending the registered agent and/or		our records, enter	the name of the new
registered agent and/or the new registered office	address here:		
Name of New Registered Agent:			-
New Registered Office Address:			
	E	Enter Florida street ad	ddress
		, Florida	
_	City	,	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

tle	Managing Member Name	<u>Address</u>	Type of Action
<u>uic</u>	Name	Address	Type of field
		· · · · · · · · · · · · · · · · · · ·	Add Remove
			Kemove
			Add
			Entre Entre
			Add and Remove
	**************************************		Add TELRemove
			Remark P. 28
			28
			- Dago
		- , ,	
			∏Add
	·		Damaya
			
			∏Add
			Remove
If amer	nding any other information, enter cl	nange(s) here: (Attach additional she	ets, if necessary.)
_	· · ·		
		 	
3	A - 10 the	20.2	
ited 4	August 19 th.	2010	
	1/2 /2 /	(1)	
	Signature of a me	mber or authorized representative of m	ember (**)
	Senni		

Page 2 of 2

Filing Fee: \$25.00