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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : I20010000062 Phone (323) 962-8600 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OVATION - SCHOOL OF MUSICAL THEATRE LLC

Certificate of Status	0
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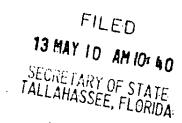
MAY 1 3 2013

COVER LETTER						
TO: Registration Section Division of Corporations						
SUBJECT: OVATION - SCHOOL OF MUSICAL THEATRE LLC						
(Name of Limited Liability Company)						
The enclosed Articles of Amendment and fee(s) are submitted for filling.  Please return all correspondence concerning this matter to the following:						
	Barbara Dang					
	(Name of Person)					
Legalzoom.com, Inc.						
	(Firm/Company)					
100 W. Broadway Suite 100						
	(Address)					
	Glendale, CA 91210					
	(City/State and Zip Code)					
For further information concerning this matter, please call:						
Barbara Dang	at (323 ) 962-8600					
(Name of						
Enclosed is a check for the	e following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)					

MAILING ADDRESS: Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



OVATION - SCHOOL OF M	IUSICAL THEATRE LLC	
(Name of the Limited)	Liability Company as it now appears on our provided Limited Liability Company)	records.)
The Articles of Organization for this Limited List Florida document number <u>L13000011740</u>	ability Company were filed on 01/23/2013	and assigned
This amendment is submitted to amend the folio	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the de	esignation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered off		ds, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	(Enter Floric	da street oddress)
	·	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)

Page 5 of 5		2013-05-10 11:54:21 PDT	13234497473 From: Tony Burroug
If amendin or Managi	ng the Managers or Managing Mei ng Member being added or remove	nbers on our records, <u>enter the title.</u> ed from our records:	name, and address of each Manager
MGR = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
<del></del>		_	
			[[D
			Add
			Remove
			Remove
			Remove
		change(s) here: (Attach additional shee	
_		LLE TEYKE shall assume the title	<del>)</del>
<u> </u>	MANAGER (MGR)		<del></del>
•			
···			<del></del>
Dated	May 4	2013	
	Mich.	la Trenha	
	Signature of a m	ember or authorized representative of a men	mber
	7176	Purple of Purple of Signee	

Page 2 of 2

Filing Fee: \$25.00