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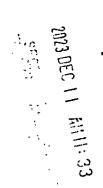
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### **COVER LETTER**

TO: Registration So Division of Con			
SUBJECT:	Name of Lim	E Ballsoon (ited Liability Company	Dance Company LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Mark	Name of Person	
	Winter	Park Ballroom Firm/Company	Dance CompanyLIC
	150 East	Robinson St Address	Un't 1205
		FL 32801 City/State and Zip Code	
	E-mail address: (	-kballroom@	anail.com
For further information c	oncerning this matter, please ca	ıll:	
Mark	Ac no++	at ( <u>407</u> ) <u>344</u> Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		
<b>₹</b> \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compa		and assigned
Florida document number <u>L21000 353</u> 5	00	<b>3</b>
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited l</u>	liability company her	<u>e</u> :
The new name must be distinguishable and contain the words "Limited L	iability Company." the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	2	
		<u></u>
		.: 20
Enter new mailing address, if applicable:	<del>**</del>	- 20 T2
(Mailing address MAY BE A POST OFFICE BOX)		
		T. — (5-12-
B. If amending the registered agent and/or registered offi	ce address on our rec	
agent and/or the new registered office address here:		
		သ သ
Name of New Registered Agent:		
New Registered Office Address:	Enter Florid	'a street address
	anter i toria	a sirver adaress
		Florida
	Сиу	Zıp Code
New Registered Agent's Signature, if changing Registered Age	<u>ent:</u>	

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title AMBR	Name Mark Arnott	Address Orlando, FL 32801 150 East Robinson Stu	Type of Action  ∧ 1 → <b>6</b> 5
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			□Remove
			□Change
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed.		
Effective date, if other than the date of filing:  [If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207.  State: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the rd is filed.  Dated  140 123 Mosenter 1044 2023		
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		100 Marson Marson
	Dated	11/10/23 1044 2023
Signature of a member or authorized representative of a member		
Signature of a memory of authorized representance of a memory		Signature of a member or authorized conventation of a manifer
13/3 1 13		organization a memory of authorizen telucacinative of a member

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Filing Fee: \$25.00