

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet  
**m1700008104**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To:

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

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (614)573-3996

**\*\*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  
STAR DANCE ALLIANCE, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

**FILED**  
**2025 FEB -3 AM 8:48**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: STAR DANCE ALLIANCE, LLC

Enter new principal office 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)

2. The Florida document number of this limited liability company is: M117000008104

3. Jurisdiction of its organization: Maryland

4. Date authorized to do business in Florida: 09/21/2017

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: DANCEONE TOURS, LLC  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: C T Corporation System

New Registered Office Address: 1200 South Pine Island Road

Enter Florida Street Address

Plantation

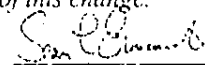
Florida 33324

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 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.



SEAN L. EMERICK, ASSISTANT SECRETARY

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

Delaware

8. If the amendment changes person, title or capacity in accordance with 605.0902 (f)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Member	Dance One Holdings, LLC	959 Seward St., Ste. 305	<input checked="" type="checkbox"/> Add
		Los Angeles, CA 90038	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

/s/Matt Purdy

Signature of the authorized representative

Matt Purdy, CFO

By: Dance One Holdings, LLC, Member

Typed or printed name of signee

Filing Fee: \$25.00

# Delaware

Page 1

The First State

*I, KRISTOPHER E. KNIGHT, ACTING SECRETARY OF STATE OF THE  
STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "STAR DANCE  
ALLIANCE, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS  
NAME TO "DANCEONE TOURS, LLC" ON THE THIRTY-FIRST DAY OF JULY,  
A.D. 2024, AT 2:42 O'CLOCK P.M.*



A stylized handwritten signature in black ink, consisting of a large 'K' followed by a series of loops and a final flourish.

Kristopher E. Knight, Acting Secretary of State

7636649 8320  
SR# 20250282654

Authentication: 202798201  
Date: 01-28-25

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)