NO4000009876

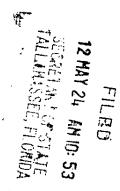
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John Charles Ma

WAY 2 5 2012

C. MUSTAIN

COVER LETTER

TO: Amendment Section Division of Corporations Empower ments Theathe Conporation NAME OF CORPORATION: _ DOCUMENT NUMBER: NO 400000 9376 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Annita M. Harris

(Name of Contact Person) Empowernents Theatre Corpuration 13544 MEALOW BAY LODP On) 3 dy 7 32824/
(City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: One of Contact Person)

at (407) 409-5655

(Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & B\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Empowerner to The	a.tre	Corpo	2x+in)		
(Name of Corporation as currently filed with the Flo		State)			
N0400009876					
(Document Number of Corpora	tion (if known)	<u></u>		
Durguent to the manifolding of agation 617 1006 Elevide Statute		AL . 27 B	.		
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida</i>	Not For Proj	it Corporation ac	lopts the foll	owing
•					
A. If amending name, enter the new name of the corporation		•			
name must be distinguishable and contain the word "corporati	EatR	ical	, Inc	Th	e new
name must be distinguishable and contain the word "corporati	ion" or "incor	porated" or i	he abbreviation '	'Corp." or "	Inc."
"Company" or "Co," may not be used in the name.	,				
B. Enter new principal office address, if applicable:	0/1	4		(1)2m	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)				Do	
					20
				- F-15	Α̈́Υ
C. Enter new mailing address, if applicable:				SS.	2
(Mailing address MAY BE A POST OFFICE BOX)	n/A	·			FIL德区
				三川の	
) n
			.77	<u> </u>	3
D. If amending the registered agent and/or registered office	a address in F	Norida antar	the name of the		
new registered agent and/or the new registered office ad		ioriua, enter	the name of the		
Name of New Parties and Assets	n				
Name of New Registered Agent:	<u>/-t</u>				
	CI / f - 4 - 4 - 4				
New Registered Office Address:	Florida street ada	iress)			
(City)		····· ·	Florida(Zip Code)	•	
(City)			(Zip Couc)		
New Registered Agent's Signature, if changing Registered			LH==4:		
I hereby accept the appointment as registered agent. I am fan	iiiar wiin and	accept the ol	nigations of the p	osiiion.	
Signature of New Registe	ered Agent if	chanoina			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe			•		
X Remove	$\underline{\mathbf{v}}$	Mike Jones					
X Add	<u>sv</u>	Sally Smith	Į.	- J -		•	
Type of Action (Check One)	Title	<u>Na</u>	<u>ime</u>	N/A		<u>Addres</u> s	
1) Change Add Remove	· ·		· .				
2) Change Add Remove	_				•		
3) Change Add Remove			<u> </u>		·····		
4) Change Add Remove							
5) Change Add Remove		<u> </u>		<u> </u>	<u> </u>		
6) Change Add Remove	· · · · · · · · · · · · · · · · · · ·			·			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)
ARticle III, purpose, is
- AMEN ded to REad:
_ To play A stanging ROIE IN
producing NEW ART WORKS And
producing new AR+ works And high impact intratives for
Audiences worldwide while
providing training and Education,
project funding performence
· opportunities and arts
administer top for the NEAT
géneration artistic minds
who share our goar of
autistic Excellence and improving
Magnality of life for our
Communities.

The date of each amendment(s) adoption: MAY 4, 2019
Effective date if applicable: MAY 28, ZDI2
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated May 18, 2012
Signature the plans
(By the chairman or vice chairman of the board, president or other officer-if directors
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Arrita M HARRIS
(Typed or printed name of person signing)
the he Staras, OLD
(Title of person signing)