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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Shakespeare in the Park Miami, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) (Firm/ Company) For further information concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & **3**\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

(Additional copy is

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

Certified Copy

Enclosed)

(Additional Copy is

# Articles of Amendment

Articles of Incorporation

<u>Jhakespeare</u> i	nthe	Park	Mian	ris Inc
(Name of Corporation as	currently filed	with the Fforida	Dept. of State)	•
NU500000 7	629			
{Document	Number of Cor	poration (if know	n)	
Pursuant to the provisions of section 617.1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this FI	orida Not For Pr	rofit Corporation a	dopts the following
A. If amending name, enter the new name of the co	rporation:			
Florida Shake name must be distinguishable and contain the word "co	Spear	re The	ater, I	nc. The new
Company" or "Co." may not be used in the name.		incorpius and		emp. or me.
B. Enter new principal office address, if applicable:				
Principal office address <u>MUST BE A STREET ADD</u>				1,
				<del>_</del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<b>V</b> )			2
). If amending the registered agent and/or registere	ed office addres	s in Florida, ent	er the name of the	T.
new registered agent and/or the new registered of		J 111 1 101 144, CIN	er the hame of the	
Name of New Registered Agent:				
	<u></u>	(Florida	(street address)	
New Registered Office Address:				
			, Florida	
_	(City)		(Zip (	
New Registered Agent's Signature, if changing Regi	stered Agent:			
hereby accept the appointment as registered agent. I	am familiar wit	h and accept the	obligations of the p	osition.
	Signature o	of New Registered	l Agent, if changing	;

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.

Exam <u>X</u> C <u>X</u> Re <u>X</u> A	hange emove	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type (Chec	of Action ck One)	<u>Title</u>	Name	Address
l)	Change			<del> </del>
	Add			
	Remove			
2) _	Change			
	Add			
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3)_	Change			
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4)	Change			
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5)	Change			
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If amending or addi attach additional she	ets, if necessary).	(Be specific)					
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The date of each amendment(s) adopt	ion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date we ment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(	s)
☐ There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated June	23,2018	
Signature	Il la stovall	
have not been so	n or vice chairman of the board, president or other officer-if directors elected, by an incorporator – if in the hands of a receiver, trustee, or pinted fiduciary by that fiduciary)	
Co//	een M Stovall	
	(Typed or printed name of person signing)	
Dir	<del></del>	
	(Title of person signing)	

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