

N/00000000748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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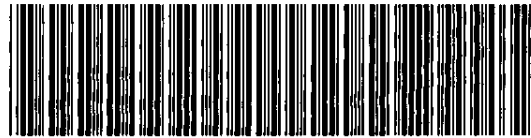
(Business Entity Name)

(Document Number)

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10/11/11--01025--005 \*\*52.50

FILED  
OCT 11 AM 11:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N/C  
E  
Amend.

DC

10/17/11

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** St. Augustine Community Ballet, Inc.

**DOCUMENT NUMBER:** N10000000748

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luis Abella

(Name of Contact Person)

(Firm/ Company)

317 Vlaverde Lane

(Address)

Saint Augustine, FL 32086

(City/ State and Zip Code)

staugballet@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis Abella

(Name of Contact Person)

at ( 904 ) 810-5670

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☒ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(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

Articles of Amendment  
to  
Articles of Incorporation  
of

St. Augustine Community Ballet, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N10000000748

(Document Number of Corporation (if known))

FILED  
NOV 11 AM 11:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

St. Augustine Ballet, Inc.

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

317 Valverde Lane

St. Augustine, FL 32086

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

\_\_\_\_\_, Florida  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered 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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
D	Boles, Joseph L, Jr.	C/O 19 Riberia St. St. Augustine, FL 32086	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
D	Weeks, Claude L Jr	C/O 19 Riberia St. St. Augustine, FL 32086	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	O'Leary, Robert	3108 Coastal Hwy St. Augustine, FL 32084	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

ARTICLE VIII - amended as follows in its entirety -

THE ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS,  
EDUCATIONAL AND SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES,  
THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT  
ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE,  
OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE.

NO PART OF THE NET EARNINGS OF THE ORGANIZATION SHALL INURE TO THE  
BENEFIT OF, OR BE DISTRIBUTABLE TO ITS MEMBERS, TRUSTEES, OFFICERS,  
OR OTHER PRIVATE PERSONS, EXCEPT THAT THE ORGANIZATION SHALL BE  
AUTHORIZED AND EMPOWERED TO PAY REASONABLE COMPENSATION FOR  
SERVICES RENDERED AND TO MAKE PAYMENTS AND DISTRIBUTIONS IN  
FURTHERANCE OF THE PURPOSE SET FORTH IN THE PURPOSE CLAUSE  
HEREOF.

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St. Augustine Community Ballet, Inc.  
Document Number N10000000748  
Amending officers and directors (continued)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
S	Joy D'Elia	31 Colony St. St. Augustine, FL 32084	Add
T	Julie Guintard	317 Valverde Lane St. Augustine, FL 32086	Add

The date of each amendment(s) adoption: 10/4/11  
(date of adoption is required)

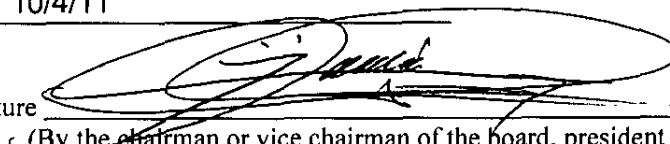
Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**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 10/4/11

Signature



(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)

Luis Abella

(Typed or printed name of person signing)

President

(Title of person signing)