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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Act 2 Stage P	roductions, Inc.
DOCUMENT NUM	BER: N10000004403	_
The enclosed Articles	s of Amendment and fee are sul	omitted for filing.
Please return all corre	espondence concerning this mat	tter to the following:
		nmy Sartin
	(Name of	f Contact Person)
	Act 2 Stage	e Productions, Inc.
	(Firm	n/ Company)
	16463	SW 28 Court
	(Address)
	Miram	ar, FL 33027
	(City/ Sta	ate and Zip Code)
		in@yahoo.com ed for future annual report notification)
For further information	on concerning this matter, pleas	e call:
Tammy Sartin		at (305) 332-5054
(Name	of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Department of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S2.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section
Division of Corporations		Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314		Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 22, 2010

TAMMY SARTIN ACT 2 STAGE PRODUCTIONS, INC. 16463 SW 28 COURT MIRAMAR, FL 33027

SUBJECT: ACT 2 STAGE PRODUCTIONS, INC.

Ref. Number: N1000004403

We have received your document for ACT 2 STAGE PRODUCTIONS, INC. and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 710A00022512

Articles of Amendment to Articles of Incorporation of



2010 SEP 28 P 3: 14

	Act 2 Stage Productions, Inc.				Inc.	ductions,	age Pro	Act 2 St		
RY OF STA	(Name of Corporation as currently filed with the Florida Dept. of State) SECRETA!	te) SECRE	State)	pt. of S	Florida Dej	ed with the	urrently	Corporation as c	(Name of C	
IULLII LO	N1000004403	IMELMI	129							
	(Document Number of Corporation (if known)				(if known)					
tion adopts	the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporate</i> g amendment(s) to its Articles of Incorporation:	ofit Corpo	r Profit	ot For	s <i>Florida N</i>					
	ding name, enter the new name of the corporation:					rporation:	ne of the c	ter the new nan	ending name, er	If amo
· the	me must be distinguishable and contain the word "corporation" or "incorporated" or "Corp." or "Inc." "Company" or "Co," may not be used in the name.	orporated'								
_	ew principal office address, if applicable: ffice address MUST BE A STREET ADDRESS)	····								
										
	ew mailing address, if applicable: g address MAY BE A POST OFFICE BOX)					<u>X</u>)				
of the	ding the registered agent and/or registered office address in Florida, enter the name of istered agent and/or the new registered office address:	er the nar	enter t	orida, e						
	ne of New Registered Agent:	_								
	Registered Office Address: (Florida street address)	-		(Florida street address)			New Registered Office Address:			
<u></u> !e)	, Florida, City) (Zip Code		, F		City)	((<u></u>			
	and A contin Simultune if changing Desigtaned Agents				.4.	intamad Amam	naina D-	Diametuus if-b.	!-4	D!
le)	istered agent and/or the new registered office address: ne of New Registered Agent: Registered Office Address: (Florida street address) , Florida	- _, Florida (Zip (, F	ess)	ssreet addre	(Florida s	registered	and/or the new istered Agent: fice Address:	egistered agent Jame of New Reg Ew Registered Of istered Agent's	<u>new r</u> <u>N</u> <u>Ne</u>

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>	Name	Address	Type of Action
			☐ Add ☐ Remove
			Add Remove
			☐ Add ☐ Remove
	or adding additional Articles, enter chional sheets, if necessary). (Be specific)	
Linon the die			hor 501(c)(3)
	solution of the organization, assets		
	for one or more exempt purposes		
of the Interna	al Revenue Code, or corresponding	g section of any future feder	al tax code, or
shall be distr	ibuted to the federal government, o	or to a state or local governr	nent, for a
public purpos	se. Any such assets not disposed	of shall be disposed of by th	ne Court of
Common Ple	eas of the county in which the princ	iple office of the organizatio	n is then
located, excl	usively for such purposes or to suc	h organization or organizati	ons, as said
	etermine, which are organized and		
Oodit olidii d	otomino, whom are organized and	oporation excitatively for ea	on parpodoo.

The date of each amendment(s) a	doption: May 4, 2010
`,	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were rs.
Dated_Septemb	per 24, 2010
Signature	Amale Sart
(By the chave not	chairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or urt appointed fiduciary by that fiduciary)
	Andre Sartin
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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