N11000000099

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SECRETARY OF STATE BIVISION OF CORPORATION

Amend & MC

MAY 1 7 2013

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Virtuoso,	Inc	
DOCUMENT NUMBER: n11000000	099	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Andrea Spritzer		
•	(Name of Contact Person	1)
Rise Above Performing	Arts Theatre	e, Inc
	(Firm/ Company)	
PO Box 51661		
	(Address)	
Sarasota, FL 34232		
	(City/ State and Zip Code	e)
riseabovetheatre(@comcast.r	net
E-mail address: (to be used	_	
For further information concerning this matter, please	call:	
Andrea Spritzer	_{st (} 513	324-0072 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$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	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

13 MAY 13 PH 2
13 MAY 12 CARADRATE
13 MAY 13 PM 2: 20

Virtuoso Inc.	•
(Name of Corporation as currently filed with the F	lorida Dept. of State)
n11000000099	
(Document Number of Corpo	oration (if known)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ates, this Florida Not For Profit Corporation adopts the follow
A. If amending name, enter the new name of the corpora	ution:
Rise Above Performing Arts Theatre	, Inc
name must be distinguishable and contain the word "corpor	ration" or "incorporated" or the abbreviation "Corp." or "Inc
"Company" or "Co." may not be used in the name.	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	
(1 Interput Office unuress MOST BE A STREET ADDRESS	
C. Enter new mailing address, if applicable:	NI/A
(Mailing address MAY BE A POST OFFICE BOX)	N/A
D. Te	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent: N/A	· · · · · · · · · · · · · · · · · · ·
Hume of thew Neglitered Agem.	
	(Florida street address)
New Registered Office Address:	
	, Florida
(City,	(Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am fo	amiliar with and accept the obligations of the position.
Cionatina of Nov. Dani	istered Agent, if changing
SIRMUTURE OF NEW REPT	BIELEA WEUL II CHANKING

Page 1 of 4

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 X Remove X Add	PT John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>PT</u>	ANDREA SPRITZER	430 CANTERBURY RD
X			VENICE, FL 34293
Remove			
2) Change	VP_	ALLISON HERBERT	3737 SPEAR AVE
X Add			ARCATA, CA 95521
Remove	S	JUDE HEBERT	3737 SPEAR AVE
X Add	<u> </u>	JODE HEDERY	ARCATA, CA 95521
Remove			
4) Change			
Add			
Remove			
5) Change	 		
Add			
Remove			
6) Change			
Add			
Remove			

e attached Articles which ha	ve been an	nended to refle	ect the decisi	ons of the ne	w Board of D	irecto
- Attached Attaces Which ha	ve been an	·				
				 		
			 			
			<u> </u>		_	
		<u>.</u>				
						
<u></u>						
				<u>.</u>		

The date of each amendment	(s) adoption: U3/31/13
Effective date if applicable:	04/01/13
and in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.
Dated 4/1/	113 11/1/14/22
(By the	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
Andrea	Spritzer
	(Typed or printed name of person signing)
Preside	ent
 	(Title of person signing)