N11000006693

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Twin Dragons	Martia	l Arts (Corp.	
DOCUMENT NUM	BER: N11000006693-1	/1			
The enclosed Articles	s of Amendment and fee are sul	bmitted fo	r filing.		
Please return all corre	espondence concerning this mat	tter to the	following	g:	
	Amarilys			0	
	(Name of	f Contact 1	Person)		
	(Firm	n/ Compai	ny)		
	12302 SW	/ 128th (Ot., #100	3	
	(.	Address)			
		i, FL 33			
		ite and Zip			
	steven_amyta E-mail address: (to be use				ation)
For further information	on concerning this matter, pleas	e call:			
Amarilys Cabrera		at (_		971-800	
(Name	of Contact Person)		(Area (Code & Daytin	ne Telephone Number)
Enclosed is a check for	or the following amount made p	ayable to	the Flori	da Department	t of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certif	ied Copy tional co	7	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327		Amend Divisio Clifton	Address Iment Section on of Corporatio Building	ns

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	ns Martial Ar		
(Name of Corporation as cur			<u>ate</u>)
	00006693-1/		
·	•	,	
Pursuant to the provisions of section 617.1006 the following amendment(s) to its Articles of		, this <i>Florida Not For F</i>	rofit Corporation adopts
A. If amending name, enter the new name	of the corporatio	<u>n:</u>	
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"			orporated" or the
B. Enter new principal office address, if ap	plicable:		2 %: -
(Principal office address <u>MUST BE A STRE</u>	ET ADDRESS)		Si A
			510
		-	一 一
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF	e: ICE ROX)		9
man cos man cos man por man cos man por constante con	<u>ICD DOM</u> ,		55
		 	
D. If amending the registered agent and/or			ter the name of the
new registered agent and/or the new reg	istered office add	<u>Iress:</u>	
Name of New Registered Agent:			_
New Registered Office Address:	(Flori	da street address)	_
			, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registere position.			ot the obligations of the
	Signature of New	Registered Agent, if cha	unging

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>	Address	Type of Action
· · · · · · · · · · · · · · · · · · ·			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
(attach addit Article IX Di	g or adding additional Articles, enter chional sheets, if necessary). (Be specific, ssolution of Organization)	
	solution of the organization, assets thin the meaning of Section 501(c)(
	ng section of any future federal tax		
federal gove	nment, or to a state or local govern	nment, for a public purpose.	Any such
assets not di	sposed of shall be disposed of the	Court of Common Pleas of	
the county in	which the principal office of the or	ganization is then located, e	xclusively
for such purp	oses or to such organization or org	ganizations, as said Court sh	nall
determine, w	hich are organized and operated e	xclusively for such purposes	3.
		· · · · · · · · · · · · · · · · · · ·	
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· · · · · · · · · · · · · · · · · · ·			
			

The date of each amendment(:	s) adoption: <u>July</u>	7 14, 2011
·	July 14, 2011	(date of adoption is required)
	(no more	than 90 days after amendment file date)
Adoption of Amendment(s)	(CHE	CK ONE)
The amendment(s) was/were was/were sufficient for appro	•	embers and the number of votes cast for the amendment(s)
✓ There are no members or me adopted by the board of dire		vote on the amendment(s). The amendment(s) was/were
have	ne chairman or vio	ce chairman of the board, president or other officer-if directors, by an incorporator – if in the hands of a receiver, trustee, of iduciary by that fiduciary)
		Amarilys Cabrera-Tarrago d or printed name of person signing)
		President
		(Title of person signing)