## N11000009234

	(Requestor's Name)		
	(Address)		
	(		
	(Address)		
	(City/State/Zip/Phone #)		
PICK-UF	P WAIT	MAIL	
	(Business Entity Name)		
	(Document Number)	·	
Certified Copies	Certificates of State	us	
Special Instructions	s to Filing Officer:		

Office Use Only



600268695646

01/28/15--01023--009 \*\*43.75

SECULTARY OF STATE DIVISION OF CHEPORATIONS

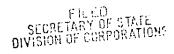
01/30/5

## COVER LETTER .

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: The Sweat	t Shop Dance	Foundation Inc
DOCUMENT NUMBER: N11000009	234	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Amanda Alvarez		
	(Name of Contact Person	))
The Sweat Shop Dance	Foundation	Inc
	(Firm/ Company)	
11115 SW 119th Street		
	(Address)	
Miami, Florida 33176		
	(City/ State and Zip Code	<del>e</del> )
mosaicdanceproj	ect@gmail.d	com
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Amanda Alvarez	<sub>at</sub> (305	5199096  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 & 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	Amend Division Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

## **Articles of Amendment Articles of Incorporation**



## 15 JAN 28 AM 7: 43 The Sweat Shop Dance Foundation Inc (Name of Corporation as currently filed with the Florida Dept. of State) N11000009234 (Document Number of Corporation (if known) 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: Mosaic Dance Project 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) 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: (Florida street address) New Registered Office Address: Florida 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.

Page 1 of 4

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)

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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Remove			
2) Change	<del></del>		
Remove			
3) Change	<del></del>		
Remove			
4) Change Add	<del></del>		
Remove			
5) Change	<del></del>		
Remove			
6) Change			
Add			
KCIIIOVC			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
,,,,,,				
	· · · · · · · · · · · · · · · · · · ·			
			- Attorney	
		· · · · · · · · · · · · · · · · · · ·		
	•••			
		<del> </del>		
		**************************************		
		· · · · · · · · · · · · · · · · · · ·		
			•	
**************************************				
·····				
			<del> </del>	

The	e date of each amendment(s) adoption:	FILEU SEURETARY OF STAT	_, if other than the
date	this document was signed.	DIVISION OF CORPORATI	เอ็พร
Effe	ective date if applicable: (no more the	nan 90 days after amendment file date 15 JAN 28 AM 7: 1	43
Ada	option of Amendment(s) (CHECK (	<u>ONE</u> )	
	The amendment(s) was/were adopted by the mem was/were sufficient for approval.	abers and the number of votes cast for the amendment(s)	
	There are no members or members entitled to vote adopted by the board of directors.	te on the amendment(s). The amendment(s) was/were	
		man of the board, president or other officer-if directors incorporator – if in the hands of a receiver, trustee, or y by that fiduciary)	-
	Amanda Alvarez		
	(Typed or printed President/CEO	name of person signing)	
	(Title o	of nerson signing)	

Production of the second