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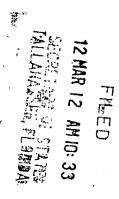
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COVER LETTER

TO: 'Amendment Section Division of Corporations

NAME OF CORPORATION: Monticello	Acting and D	ance Company, Inc.
DOCUMENT NUMBER: N11000009	263	÷
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Pam Mueller	•	
	(Name of Contact Person	n)
	(Firm/ Company)	
737 Silver Lake Road		
, ,	(Address)	
Monticello, FL 32344		
	(City/ State and Zip Code	e)
muellermont@aol		·
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	er e
Pam Mueller	at (850	997-3551
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
\$35 Filing Fee \$\text{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		Address ment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Monticello Acting and Dance Compa	ny, Inc.
(Name of Corporation as currently filed with the Flor	rida Dept. of State)
N11000009263	
(Document Number of Corpora	ation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:
N/A ·	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	The state of the s
	R ₁
	N/A
C. Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	
	, , , , , , , , , , , , , , , , , , ,
D. If amending the registered agent and/or registered offic	e address in Florida, enter the name of the
new registered agent and/or the new registered office a	
Name of New Registered Agent: N/A	······································
·	(Florida street address)
New Registered Office Address:	promus street usuressy
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am far	miliar with and accept the obligations of the position.
Signature of New Regist	tered Agent, if changing

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	•
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove		N/A	
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove	•		
5) Change Add Remove		_	
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific) Article III. Purpose
Monticello Acting and Dance Company, Inc. is formed exclusively for the charitable,
educational purposes under 501(c)(3) of the Internal Revenue Code. This education
in the Arts, including dance, theatre and music, will include classes and performances within the
Monticello, Florida community. To have and to exercise to the extent necessary or desirable for the
the accomplishment of any of the aforesaid purposes, and to the extent that they are not
inconsistent with the charitable purposes of the Corporation, any and all powers provided
by Chapter 617,F.S., the Florida Not For Profit Corporation Act.
Article VIII. Dissolution
Upon the dissolution of Monticello Acting and Dance Company, Inc., assets shall be distributed
for one or more exempt purposes within the meaning of section 501c)(3) of the Internal Revenue
Code, or corresponding section of any future federal tax code.

The date of each amendment(s) adoption: January 5, 2011				
Effective date if applicable:				
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) val.			
There are no members or men adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.			
Dated March	16, 2012			
have not b	airman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)			
Tammy B	Brookins			
	(Typed or printed name of person signing)			
President	<u>t</u>			
	(Title of person signing)			