## N11000010469

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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** The Art Studio Group, Inc. NAME OF CORPORATION: N11000010469 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Judith A. Shaulis, President (Name of Contact Person) The Art Studio Group, Inc. (Firm/ Company) 370 A1A Beach Boulevard, (Address) 32080 St. Augustine Beach, FL (City/ State and Zip Code) President@artstudiosa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judith A. Shaulis 671-5843 (Name of Contact Person) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

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

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

## Articles of Amendment to Articles of Incorporation of

The Art Studio Group, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N11000010469 (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: St. Augustine Beach Art Studio & Gallery, Inc. 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. n/a 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 (Citv) (Zip Code) 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: XChange X Remove X Add	PT         John De           V         Mike Je           SV         Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
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If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)					
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	May 18, 2017	
The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
	``	
Effective date if applicable:		<del></del>
(ne	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does n document's effective date on the Department	not meet the applicable statutory filing requirements, this date wi of State's records.	ill not be listed as the
Adoption of Amendment(s) (G	CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s	)
There are no members or members entitle adopted by the board of directors.	led to vote on the amendment(s). The amendment(s) was/were	
June 15, 2017 Dated		
1. dith	Q Quili	
Signature (Durha Asimum and	ice chairman of the board, president or other officer-if directors	
	ed, by an incorporator – if in the hands of a receiver, trustee, or	
	I fiduciary by that fiduciary)	
	· · · · · · · · · · · · · · · · · · ·	
Judith A. Shaulis		
	(Typed or printed name of person signing)	
0. 11		
President		
	(Title of person signing)	