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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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10 Janes

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: KEMPE	R DANCE, INC	•
DOCUMENT NUMBER: N12000		•
DOCUMENT NUMBER: N12555		
The enclosed Articles of Amendment and fee are sub-	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
John Kemper	(Name of Contact Perso	
•	(Name of Contact Person	n)
Kemper Dance		
	(Firm/ Company)	
· .		
1205 S. WOODLAND		re 5
	(Address)	
DELAND FL 3272	0	
	(City/ State and Zip Cod	e)
kemperj@cfl	l. rr. com ed for future annual report	
E-mail address: (to be use	ed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
Kim Mallory (Name of Contact Person)	at (386	228 - 5158
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable 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	Street	Address
Amendment Section	Ameno	Iment Section
Division of Corporations		on of Corporations
P.O. Box 6327 Tallahassee, FL 32314		n Building Executive Center Circle
Tunundasco, FIZ JEJ 14	2001 1	ACCURITE COMO CHOIC

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



KEMPER	DANCE , INC.		_ ′
(Name of Corporation as currently	filed with the Florida Dept. of	<u>(State</u>)	
N120000	006980		
	Number of Corporation (if know	/n)	-
Pursuant to the provisions of section 617.10 amendment(s) to its Articles of Incorporation		a Not For Profit Corporation adopts the	followin
A. If amending name, enter the new nam	e of the corporation:		
KEMPER	DANCE ENSEMB	LE , INC.	_The nev
name must be distinguishable and contain t	he word "corporation" or "inco	orporated" or the abbreviation "Corp." o	or "Inc."
<u>"Company" or "Co." may not be used in th</u>	<u>ie name</u> .		
B. Enter new principal office address, if	applicable:		_
(Principal office address <u>MUST BE A STR</u>	REET ADDRESS)		
	<u> </u>		-
			~
C. Enter new mailing address, if applica	hle:		
(Mailing address MAY BE A POST OF			_
			-
			_
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 i			
Name of New Registered Agent:			
Name of New Registered Agent.	 		
•	(Florida sircet a	uldracs)	
New Registered Office Address:	fr to the sireer of	au essy	
		Monida	
_	(City)	, Florida (Zip Code)	
	• • •	, . <i>,</i>	
New Registered Agent's Signature, if cha I hereby accept the appointment as register		al account the abligations of the position	
norces accept the appointment as registers	ea agem 1 am jammar wiin ar	is seeep the oringations of the position.	
	7.1. IS		
· Signa	ture of New Registered Agent, i	it 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 X Remove X Add	<u>V</u> <u>Mik</u>	n Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>\$</u>	Holly Arnold	1205 S. Woodland Blvd. Suite 5 Deland, FL 32720
2) Change Add Remove	<u>_</u> S	Aimee Dirienzo	1205 S. Woodland Blvd. Suite 5 Deland, FL 32720
3) Change Add Remove			
4) Change Add	***************************************		
Remove 5) Change Add	-		
Remove 6) Change Add			
Remove			

C. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)		
		The state of the s
	VI	

The d	late of each amendment(s) adoption: August 10, 2012
Effect	tive date <u>if applicable</u> : (no more than 90 days after amondment file date)
Adopt	tion of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 08/09/12
	Signature
	(By the chairman of vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)