N14000006232

(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	; #)		
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15 MAR 13 AM 9: 10

12/16/15

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Villages	Allstar Maste	r Productions, Inc.
DOCUMENT NUMBER: N140000	06232	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Bonnie Felicicchia		
	(Name of Contact Perso	n)
·		
	(Firm/ Company)	
1479 Blueberry Way		
	(Address)	
The Villages, FL 3216	2	
	(City/ State and Zip Coo	le)
bonniefel@com	ncast.net	notification
For further information concerning this matter, p	·	nouncation
Bonnie Felicicchia	_{at /} 352	446-4330
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount ma	de payable to the Florida Dep	artment of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee Certificate of Sta	ce & 🗖\$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	Amen Divisi Cliftor	Address dment Section on of Corporations n Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILEO SECTETARY OF STATE DIVISION OF CORPORATIONS

Villages Allstar Master Productions, Inc.			15 MAR 13		AM	9:19
(Name of Corporation as currently fi	ed with the F	orida Dept. of State)				_
N14000006232						
(Document)	nt Number of C	Corporation (if known)	• ,			-
Pursuant to the provisions of section 617.1006 amendment(s) to its Articles of Incorporation:	i, Florida Statut	tes, this <i>Florida Not For P</i>	rofit Corporation	ado;	ots the	followi
A. If amending name, enter the new name	of the corpora	tion:				
Evolution Dance, Inc.						The ne
name must be distinguishable and contain the "Company" or "Co," may not be used in the		ation" or "incorporated" o	or the abbreviation	n "Co	orp."	
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE	plicable:	N/A		· · · ·		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A				-
D. If amending the registered agent and/or new registered agent and/or the new re			ter the name of	the		-
Name of New Registered Agent:	/A					
		(Florida street address)				
	/A		, Florida			
	(City))		(Zip	Code)

Page 1 of 4

Signature of New Registered Agent, if changing

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.

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 <math>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 I V Mike J SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	Name .	<u>Addres</u> s
1) Change Add Remove	DANCE CAPTAIN	Linda Berthiaume	1314 Guadalupe Ct. The Villages, FL 32159
2) Change Add Remove	***************************************		
3) Change Add Remove			
4) Change Add Remove	and the Artiflet from the suppression of		
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)						
N/A	•					
	7.4.4					
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The date of each amendment(s) add	ption: February 18, 2015	- 	if other than the
date this document was signed.		SECRETARY	if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	15 MAR 13	AM 9: 19
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the	ne amendment(s)	
There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s). The amendme	nt(s) was/were	
Dated March	10, 2015		
Signature Lou	na Felicicchea		
have not been	nan or vice chairman of the board, president or other off in selected, by an incorporator—if in the hands of a recei oppointed fiduciary by that fiduciary)		
Bonnie Feli	cicchia		
	Typed or printed name of person signing)		
Secretary			
	(Title of person signing)	_	