

N15000005590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

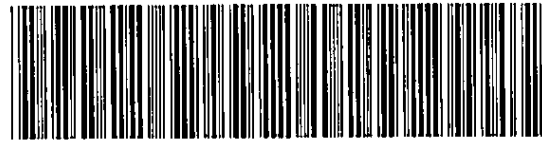
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AUG 23 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Valerie Theatre Culural Center, Inc

DOCUMENT NUMBER: N15000005580

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dr Frederick J Herzog, PhD
(Name of Contact Person)

Dr Frederick J Herzog PhD LLC
(Firm/ Company)

1201 W Beagle Run Loop
(Address)

Hernando FL 34442
(City/ State and Zip Code)

therzog@tampabay.rr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frederick J Herzog, PhD at 847-899-9000
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

(Name of Corporation as currently filed with the Florida Dept. of State)

Valeria Theatre Cultural Center, Inc

(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:

The Valeric Players, Inc

The new 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**)*

Linda Bega

311 N Main Street

Inverness, FL 34450

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

1201 W Beagle Run Loop

Hernando, FL 34442

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:

Dr Frederick J Herzog, PhD LLC

1201 W Beagle Run Loop

(Florida street address)

New Registered Office Address:

Hernando

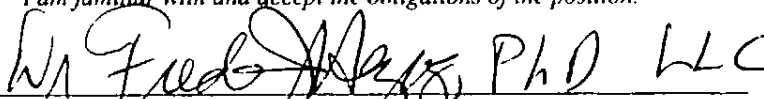
(City)

Florida 34442

(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.


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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 8-6-21 if other than the date this document was signed.

Effective date if applicable: 8-6-21
(no more than 90 days after amendment file date)

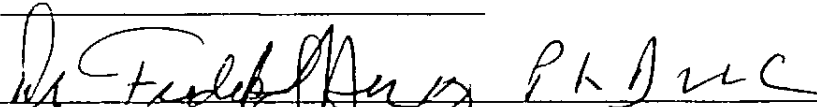
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption 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 8-6-21 _____

Signature  _____

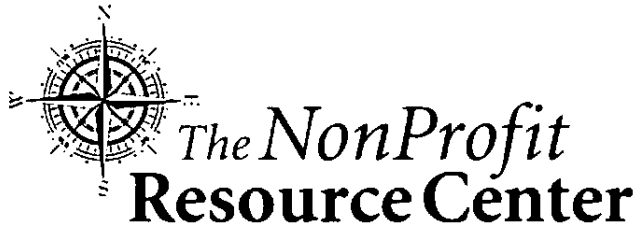
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Dr Frederick J Herzog, PhD LLC See Power of Attorney Attached

(Typed or printed name of person signing)

Registered Agent

(Title of person signing)



"Navigating the Complexities of Non Profit
Organizations & Empowering Them for Success"

Dr. Frederick J. Herzog, PhD, LLC
1201 West Beagle Run Loop
Citrus Hills, FL 34442
Email: fherzog@tampabay.rr.com

Phone: (847) 899-9000 Fax: (352) 419-6399
www.TheNonProfitResourceCenter.com

8-13-21

**Amendment Section
Division of Corporations
The Center of Tallahassee
2415 N Monroe St /Ste 810
Tallahassee, FL 32303**

Please find enclosed corporate Name Change and change in Registered Agent filing amendment, cover letter, power of attorney granted to me and check for \$52.50.

Respectfully,


Dr Frederick J Herzog, PhD LLC

Thank you for your service...



**The NonProfit
Resource Center**

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**POWER OF ATTORNEY
And
Declaration of Representative
8-6-21**

I Linda Bega Hereby grant Dr Frederick J Herzog, PhD LLC
LINDA BEGA, TREASURER

Power of Attorney and Declaration as Representative for a 501(c) (3) Domestic Non Profit Florida Corporation known as Valerie Theatre Cultural Center, Inc., EIN 30-087872728. This gives permission to consult with the EO Div., of IRS and Florida State to make changes to the nonprofit entity as required and in the best interests of the organization.


Professional services shall include the following: Florida name change search and filing new name as: The Valerie Players, Inc., submission of name change to IRS and Florida State. Request updated Determination letter from IRS with new name. Review current ByLaws making any IRS required changes if required and submit changes to IRS. Review of 2020 IRS 990 for reference purposes only.

Special Note: It is recommended an amendment be sent to Florida State adding new officers and directors to the corporate document. I recommend that the number of officers and directors total represent an odd number.

Ref: Document changes: Name and changes for: The Valeria Players, Inc. cont.

Accepted

**Linda Bega, Treasurer
Valerie Theatre Cultural Center, Inc**

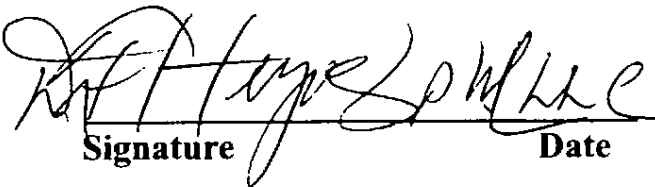


Signature Date

8.11.21

Agreed

**Dr Frederick J Herzog, PhD LLC
NonProfitResourceCenter of
Citrus County, Florida**



Signature Date