N160000086666

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basilless Ellak) Halle)
(Document Number)
Certified Copies Certificates of Status
<u> </u>
Special Instructions to Filing Officer:





500418865605

11/13/23--01017--017 **85.00



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Arts
N16000008666 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Ornella Verano	
	(Name of Contact Person)
Las Olas Capital Arts	
	(Firm/ Company)
888 East Las Olas Boulevard	
	(Address)
Fort Lauderdale FL 33301	
	(City/ State and Zip Code)
jodi.tanner@lasolascap.com	(City/ State and Zip Code)
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, ple	ase call:
Ornella Verano	954 793-2923 at
(Name of Contact Pers	
Enclosed is a check for the following amount made	e payable to the Florida Department of State;
■ \$35 Filing Fee	
Mailing Address	Street Address

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

Las Olas Capital Arts (Name of Corporation as currently filed with the Florida Dept. of State) N16000008666 (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: N/A 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: N/A (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 _ (City) (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: X Change X Remove X Add	PT John f V Mike . SV Sally 5	<u>lones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>D</u>	Grace Kewl-Durfey	
Remove			
2) Change	D	Heather Renee	5966 SW 112th Lane Fort Lauderdale, FL 33330
Remove 3) Remove	D	Doan Ly	2131 N 57th way Hollywood FL 33021
4) Change Add	<u>D</u>	Jason Engleson	
2 Remove 5)	D	Brianna Reeves	220 SE 2nd St. Apt 2410 Fort Lauderdale FL 33301
6) * Change Add	VDS	Ornella Verano	1513 NE 18th Street Fort Lauderdale FL 33305
E. If amending or addin (attach additional shee		ticles, enter change(s) here: (Be specific)	
			

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	Omella Verano	888 E Las Olas Blvd #200 Fort Lauderdale FL 33301
2) <u>× Change</u> Add	D	Saige Bergel	11200 Biscayne Blvd Miami FL 33181
Remove	D	Hannah Bissani	11200 Biscayne Blvd Miami FL 33181
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or addir (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	

•	
	3
	<u> </u>
	<u>.</u>
	5
	20
	·
The date of each amondment(s) adoptions	10 AL A A
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after amendme	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory fili	
document's effective date on the Department of State's records.	ing requirements, this date will not be fisted as the

(CHECK ONE)

■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

Adoption of Amendment(s)

was/were sufficient for approval.

	members or members entitled to vote on the amendment(s). The amendment(s) was/were he board of directors.
Dat Sign	nature (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)
	Jodi Tanner
	(Typed or printed name of person signing)
	President

(Title of person signing)