N17000008920

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Amend

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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	THE BALLET AND N:	DANCE ORCHEST	RA, INC.	
POCUMENT NUMBER: _	N17000008920			
The enclosed Articles of Amo	endment and fee are subm	itted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
EZRA HAUGABROOKS				
	(Name of Contact Pe	rson)	
THE BALLET AND DANC	E ORCHESTRA, INC.			
		(Firm/ Company	·)	
PO BOX 172742				
	<u>. </u>	(Address)		
TAMPA, FL 33705				
		(City/ State and Zip	Code)	
thebadorchestra@gmail.com	1			
Е	-mail address: (to be used	for future annual rep	ort notification	n)
For further information conc	erning this matter, please of	call:		
Ezra Haugabrxos		at	321	693-5704
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida I	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
Mailing Address Amendment Section			reet Address nendment Sect	ion

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE BALLET AND DANCE ORCHESTRA, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N17000008920 (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: 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) 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 (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: 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	<u>V</u> <u>Mik</u>	n Doc e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Chairma	Antonio Daley	3661 Rochelle Lane
X Add			Apopka FL 32712
Remove			
2) Change	COO	Art Stoutenburg	2240 Kings Palace Drive
Add			Riverview, FL 33578
X Remove			
) Change			
Add			
Remove			
Change			
Add			
Remove			
Change			
Add			
Remove			
Change			
Add			
Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
 		
		.

The	date of each amendment(s) adop	tion:	, if other than the
	this document was signed.		
Effe	ective date if applicable:		
		(no more than 90 days after amendment file date)	
	te: If the date inserted in this block ument's effective date on the Depar	does not meet the applicable statutory filing requirements, this date will not tment of State's records.	be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were adop was/were sufficient for approval.	sted by the members and the number of votes cast for the amendment(s)	
	There are no members or members adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/were	
	Dated 03/19/2019		
	Signature	A duple	_
	have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	Ezra Hauga	brooks	
		(Typed or printed name of person signing)	
	President a	nd CEO	
		(Title of person signing)	