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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Franks Music & Da ON:	nce Inc			
	N18000006637				
DOCUMENT NUMBER:					· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Ar	nendment and fee are subn	nitted for filing.			
Please return all correspond	ence concerning this matte	r to the following:			
		(Name of Contact I	Person)		
		(Firm/ Compar	ıy)		
		(Address)			
		(City/ State and Zip	Code)		
grahamanderson82@ya	noo.com				
	E-mail address: (to be used	for future annual re	port notifi	cation)
For further information con	cerning this matter, please	call:			
Graham F Anderson		а	386 .t		341-7900
	(Name of Contact Person)		(Area Co	ode)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	yable to the Florida	Departme	nt of S	itate:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	is (Certifi Certifi) Filing Fee cate of Status ed Copy ional Copy is sed)

Mailing Address

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

Division of Corporations Clifton Building 2661 Executive Center Circle

FILED

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SECULTARY OF STATE TALLAHASSEE, FLORICA

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as o	currently filed with the Flor	rida Dept. of State)
Franks Music & Dance Inc		
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
Franks Dance & Music Inc		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>(</u>)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		, enter the name of the
Name of New Registered Agent:		
<u>New Registered Office Address:</u>	(F	londa street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi- I hereby accept the appointment as registered agent.		t the obligations of the position.
	Signature of New Regis	tered 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 Do V Mike Je SV Sally Si	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			

f amending or adding additional Arti utach additional sheets, if necessary).	(Be specific)			
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	<u>.</u>			
				

The date of each amendme	nt(s) adoption:	, if other than the
date this document was signe	ed.	
Effective date if applicable		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was was/were sufficient for	/were adopted by the members and the number of votes cast for the amendment(s) approval.	
There are no members adopted by the board o	or members entitled to vote on the amendment(s). The amendment(s) was/were f directors.	
06/0 Dated	07/2018	
Signature	Graham 9. AndElson	
have	he chairman or vice chairman of the board, president or other officer-if directors into been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
C	Graham F Anderson	
	(Typed or printed name of person signing)	
F	President	
	(Title of person signing)	