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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Foundation Inc			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee ar				
Please return all correspondence concerning this	matter to the following:			
Jasmina Bishop				
	(Name of Contact Pe	erson)		
	(Firm/ Company	·)		
1370 Blvd of the arts				
	(Address)			
Sarasota,FL 34236				
	(City/ State and Zip (Code)		
dancesportspectacular@gmail.com				
E-mail address: (to be	e used for future annual rep	ort notificat	on)	
For further information concerning this matter, p	olease call:			
Jasmina Bishop	at	941	799-0800	
(Name of Contact P	erson)	(Area Code		oer)
Enclosed is a check for the following amount ma	ade payable to the Florida I	Department (of State:	
\$35 Filing Fee S43.75 Filing F Certificate of St	ee & \$\Bigsiz\$\$ \$\\$43.75\$ Filing Fee atus Certified Copy (Additional copy is enclosed)	Cer Cer (Ad	.50 Filing Fee dificate of Status dified Copy ditional Copy is closed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Am Div	eet Address lendment Se vision of Cor fton Buildin	ction porations	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

World Dance Foundation, INC		
(Name of Corporation as curre	ently filed with the Flo	orida Dept. of State)
N18000008893		
(Document Nun	nber of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ates, this Florida Not F	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:	
		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRES:</u>	<u>S</u>)	
C. Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX)		
		त्रा हा
D. If amending the registered agent and/or registered of		a, enter the name of the
new registered agent and/or the new registered office	address:	ν-
Name of New Registered Agent:		
New Registered Office Address:	"	Florida street address)
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere	d Agent:	
hereby accept the appointment as registered agent. I am f	familiar with and accep	ot the obligations of the position.
	Signature of New Regi.	stered 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)
Organized exclusively for charitable and educational purposes.
May engage in cultural and social community events and services to people of all ages, underprivileged and
disabled an opportunity to learn, grow and excel at ballroom dance.

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

8/16/2018	
The date of each amendment(s) adoption:late this document was signed.	, if other than the
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amend was/were sufficient for approval.	ment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	/were
Dated 8/16/2018	
Signature 16	
By the chairman or vice chairman of the board, president or other officer-if did have not been selected, by an incorporator – if in the hands of a receiver, trust- other court appointed fiduciary by that fiduciary)	ectors ee, or
Zydrunas Pocius	
(Typed or printed name of person signing)	
President	
(Title of person signing)	