N94000004334

| (F | Requestor's Name) | |
|-------------------------|-------------------------|---------|
| (A | ddress) | |
| (A | ddress) | |
| (C | City/State/Zip/Phone #) | |
| PICK-UP | WAIT . | MAIL |
| (E | Business Entity Name) | |
| (0 | Occument Number) | |
| Certified Copies | Certificates of | Status |
| Special Instructions to | o Filing Officer: | |
| | | |
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| | | <u></u> |
| 5 | Office Use Only | |



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7) de Charge 7 ano 09/08/14--01004--019 **35.00



9/12/14

COVER LETTER

TO: Amendment Section . Division of Corporations

| NAME OF CORPORATION: Citrus Fig | jure Skating | Club, Inc |
|--|--|---|
| DOCUMENT NUMBER: N9400004 | 334 | |
| The enclosed Articles of Amendment and fee are subr | nitted for filing. | |
| Please return all correspondence concerning this matter | er to the following: | |
| Agnes Chau | | |
| | (Name of Contact Person | 1) |
| Law Office of Agnes Cha | au, P.A. | |
| | (Firm/ Company) | |
| 716 E. Colonial Dr | | |
| | (Address) | |
| Orlando, FL 32803 | | |
| | (City/ State and Zip Cod | e) |
| amc@agneschau E-mail address: (to be used | | |
| For further information concerning this matter, please | call: | |
| Agnes Chau | 40 7 | 648-0880 |
| (Name of Contact Person) | (Area Co | ode & Daytime Telephone Number) |
| Enclosed is a check for the following amount made pa | yable to the Florida Depa | artment of State: |
| ■ \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$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 | Ameno Divisio Clifton 2661 E | Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301 |

Articles of Amendment

Articles of Incorporation

| | | of | FII | _ED | |
|---|----------------------------|--|------------------------------------|---|-------|
| CITRUS FIGURE SKATI | NG CLUB, | INC. | | | |
| (Name of Corporation as currentl | y filed with the Flo | rida Dept. of State) | 2014 SEP -8 | | |
| N94000004334 | | | SEEMS OF RY TALL AN ASSE | ger_STATE | |
| (Docu | iment Number of Co | orporation (if known) |) Minte 471 + 55t 9. | -E.FLORIDA | |
| Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporation | | es, this <i>Florida Not I</i> | For Profit Corpo | oration adopts the follo | owing |
| A. If amending name, enter the new na | me of the corporati | ion: | | | |
| ORLANDO FIGURE SKA | TING CLUE | B, INC. | | The | e new |
| name must be distinguishable and contain "Company" or "Co." may not be used in B. Enter new principal office address, if (Principal office address) | the name. f applicable: | | ed" or the abbr | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 716 E. Cold | | | |
| D. If amending the registered agent and new registered agent and/or the new | registered office a | ddress: | a, enter the nai | ne of the | |
| Name of New Registered Agent: | Agnes Cha | <u>u</u> | | - | |
| | 716 E. Cold | onial Dr. | | | |
| New Registered Office Address: | | (Florida street address) | | - | |
| | Orlando | | Florida | 32803 | |
| | (City) | | , r lorida | (Zip Code) | |
| New Registered Agent's Signature, if ch I hereby accept the appointment as registe | ered agent. I am fai | Agent: miliar with and acception Signal Control Registered Agent, if | | ıs of the position. | |
| | | | | | |

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 | | Doe 2 Jones 2 Smith | |
|----------------------------------|--------------|---------------------------|--------------------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | <u>T</u> | RUPP, SHARON M | 6190 ALLIGATOR LAKE SHORE WEST |
| Add X Remove | | | ST. CLOUD, FL 34771 |
| 2) Change | Р | CHAU, AGNES | 7313 HARLIE STREET |
| Add | | | ORLANDO, FL 32819 |
| Remove 3) Change | Р | KORY, LORY | 2221 PARTIN SETTLEMENT RD |
| X Add | | | KISSIMMEE, FL 34744 |
| Remove | | | |
| 4) Change | VP | USHOVA, IRINA | 2221 PARTIN SETTLEMENT RD |
| X Add | | | KISSIMMEE, FL 34744 |
| Remove | | | |
| 5) Change | Т | MISCHKA, KAREN | 2221 PARTIN SETTLEMENT RD |
| X | | ····· | KISSIMMEE, FL 34744 |
| Remove | | | |
| 6) Change | S | MISCHKA, KAREN | 2221 PARTIN SETTLEMENT RD |
| X Add | | | KISSIMMEE, FL 34744 |
| Remove | | Page 2 of 4 | |

| f amending or adding additional Articutach additional sheets, if necessary). | (Be specific) |
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| | e date of each amendment(s) adoption: | , if other than the |
|------|--|---------------------|
| date | e this document was signed. | |
| Effe | ective date <u>if applicable</u> : | <u></u> |
| | (no more than 90 days after amendment file date) | |
| Add | option 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 08/13/2014 | |
| | 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) | |
| | (Typed or printed name of person signing) Yresident | |
| | (Typed or printed name of person signing) | |
| | Yresident | |
| | (Title of person signing) | |