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SECRETARY OF STATE.

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. TO: Amendment Section

Division of Corporations			
NAME OF CORPORATION: Hollie'S Dancin' Dream Inc.			
DOCUMENT NUMBER: 20-2397678			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Name of Contact Person			
Hollie's Dancin' Dream Inc.			
725 Atlantic Blvd Suite 20			
Atlantic Beach, Fl. 32233 City/ State and Zip Code			
dendreame belisouth, net E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Hollie McMillon at (904) 237-8850 Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301			

Articles of An	nendment		
Articles of Inco	orporation 200		
Hollie's Doncin' Drea	am, Inc. 7500 y		
(Name of Corporation as currently filed with t	the Florida Dept. of State		
4050000262	92 ASSEROIS		
(Document Number of Corporati	on (if known)		
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following		
A. If amending name, enter the new name of the corporation	<u>a:</u>		
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional association association "Corp.,"	orp," "Inc," or "Co". A professional corporation		
•	725 Atlanta Died		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	125 ATTWINE DVA		
(17 melput office united states and states and states and states are states as a state of the states are states as a state of the states are states as a state of the state of the states are states as a state of the state of th	Suite 20		
	Attantic Beh, Fl. 32233		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	725 Atlantic Blvd		
	Atlantic Bch. Fl 32233		
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:			
New Registered Office Address: (Flori	da street address)		
	, Florida		
(City)	(Zip Code)		
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am familiary	gent: liar 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
 			☐ Add ☐ Remove
	to Marketina (A. M. 1977) and 1		☐ Add ☐ Remove
	water date and the date of the		— N
(attach a	dditional sheets, if necessary). (E	de specific)	
provisi	mendment provides for an excharons for implementing the amendrate applicable, indicate N/A)		

The date of each amendment(s	8/31/09
•	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
-	(no more than 90 days after amenament file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval
by	
((voting group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	31-09
selec	a director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Holie McMillon (Typed or printed name of person signing)
	President (Title of person signing)