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COVER LETTER

TO: Amendment Section Division of Corporations

•	Notice -	- maiala	Dance Cr	~ ~ ~ ~
NAME OF CORPORA	^	cor Mainte	1 mice Gr	an h
DOCUMENT NUMBE	r: <u> </u>	36531		
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.		5 NUG 25
Please return all correspo	ondence concerning this mat	ter to the following:		25
d	Kietla May	Name of Contact Person	Samble	- M 0: 5
_	Advanuory	Nachtla Firm/Company	re Gray	COPT
—	8740 Cresta	Att Cerc		
5x land 0 87 32819				
	E-mail address: (lo be us	City/ State and Zip Code City/ State and Zip Code City/ State and Zip Code City/ State and Zip Code	m	_
For further information of	concerning this matter, pleas	e call:		
KicHa M Name of	Contact Person	at (AS)	de & Daytime Telephone N	Jumber
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	ertment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
34.4P	A 1.3	64 . 4	4.3.4	

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
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new nam	ne of the corporation	n:		
Advances Maid- ame must be distinguishable and contain Corp.," "Inc.," or Co.," or the designate cord "chartered," "professional association	in the word "corpoi	ration," "company," of or "Co". A profession ion "P.A."	r 'incorporated" o nal corporation nam	e must contain the
. Enter new principal office address, if Principal office address <u>MUST BE A STE</u>		DY/au	2709 Pas 1900, Fl 3	20 Ave#10 32805
Enter new mailing address, if applica (Mailing address MAY BE A POST OF	able: FFICE BOX	2 popol P	?.o. Box do, A 3	692286 2869
. If amending the registered agent and/new registered agent and/or the new			er the name of the	
Name of New Registered Agent	-n x			
-	(Florid	da street address)		
New Registered Office Address:			, Florida_	
		(City)		(Zip Code)
ew Registered Agent's Signature, if cha hereby accept the appointment as register			obligations of the p	osition.
	Signature of N	lew 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 <math>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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add		1 ^	
Remove		$\Lambda \setminus X$	
3) Change		_ ////,	
Add			
Remove			
4) Change		· .	
Add			
Remove			
5) Change			
Add			
Remove			
13311010			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)	
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f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(i) not approache, maleure 1971)	
T X	
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The date of each amendment(s) adoption: August 21, 2015 , if other that date this document was signed.
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 date will not be listed a document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated August 21, 2015
Signature Kutte ni Chamble
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Kietla M Gamble
(Typed or printed name of person signing)
Worldont

(Title of person signing)