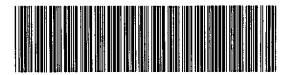
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C LEWIS

COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: St. Augustine Academy of the Arts, Inc. DOCUMENT NUMBER: P12000064318 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Tasha Wells Name of Contact Person St. Augustine Dance Academy, Inc. Firm/ Company 200 Business Park Circle Suite 113
Address info@staugdance.com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (904) 716-9195

Area Code & Daytime Telephone Number Jason Wells Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

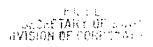
Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



St. Augustine Academy of the (Name of Corporation:	Arts, Inc. 2017 FEB - 6 AM 10:31
(Name of Corporation:	as currently filed with the Florida Dept. of State)
P12000064318	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
St. Augustine Dance Academy, In name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb	"C. The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent NA	
	(Florida street address)
New Registered Office Address:	, Florida
Ton Rogard on Office Road	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I as	ered Agent: m familiar with and accept the obligations of the position.
Signatu	re 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)

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	<u>PT</u>	John Do	<u>ee</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change		_	N/A		
Add					
Remove					
2) Change				-	
Add				,	
Remove					
3) Change		_			
Add					
Remove					
4) Change		<u> </u>			
Add					
Remove					
5) Change					
Add		-		•	
Remove					
Kelilove					
6) Change		_			
Add				,	
Remove					

•	(Be specific)
N/A	
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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(if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an indicate the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an

The date of each amendment(s) adoption:	02/03/2017	, if other than the
late this document was signed.		ALLESTARY OF AVERAGE AND
effective date if applicable: 02/03/2	2017	The state of the s
	(no more than 90 days after amendment file date)	2017 FEB -6 AM 10: 31
Note: If the date inserted in this block does a document's effective date on the Department of	not meet the applicable statutory filing requirements, f State's records.	this date will not be listed as the
Adoption of Amendment(s) (Cl	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amen approval.	dment(s)
``	ne shareholders through voting groups. The following group entitled to vote separately on the amendment	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by	oting group)	
(vo	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareho	lder
Dated 02/03/201	1	
Q_{i}	2/2/0	
Signature	sident or other officer – if directors or officers have no	nt heen
	corporator – if in the hands of a receiver, trustee, or other	
	y by that fiduciary)	
Tash	a Wells	
	(Typed or printed name of person signing)	
Divec	tor	
	(Title of person signing)	