P14000085486

	questor's Name)			
(Re	questors (vame)			
(Ad	dress)			
·	·			
(Ad	dress)			
(Cit	y/State/Zip/Phone	· #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
		ļ		

Office Use Only



400272749314

05/15/15--01014--014 **35.00

MAY 2 0 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	TION: A SPACE COAST BALLET ACADEMY, INC.					
DOCUMENT NUMBER:	P14000085486		1- 1-1			
The enclosed Articles of Amenda	ment and fee are su	bmitted for filing.				
Please return all correspondence	concerning this ma	tter to the following:				
	DOMENIC H. CALICCHIA					
	Name of Contact Person					
	PROFESSIONAL ACCOUNTING SERVICES, INC.					
		Firm/ Company				
	1520 BOTTLEBRUSH DR. NE					
	Address					
	PALM BAY, FL. 32905					
****		City/ State and Zip Cod	e			
E-ma	il address: (to be us	sed for future annual report	notification)			
			······,			
For further information concerning	ng this matter, pleas	se call:				
JANNA KIROVA		at (508-4375			
Name of Contact	Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the follow	wing amount made	payable to the Florida Depa	artment of State:			
	3.75 Filing Fee & rtificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Addr Amendment So Division of Co P.O. Box 6327 Tallahassee, F.	ection rporations	Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301			

Articles of Amendment to Articles of Incorporation of

ET ACLADUAGE INC.

adopts the following amendments) to The new
adopts the following amendments) to the second seco
adopts the following amendments) to the second seco
adopts the following amendments) to the second seco
The new
porated" or the abbreviation pration name must contain the
= = = = = = = = = = = = = = = = = = =
ame of the
33019
, Florida

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 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) X Change	Р	JANNA KIROVA	1343 WASHINGTON ST.
Add			HOLLYWOOD
Remove			FL 33019
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	41.		
Add			
Remove			
6) Change			
Add			
Remove			

	cles, enter chan (Be specific)	-			
					
······································					
		 _			
					
	-	<u> </u>			
				· · · · · · · · · · · · · · · · · · ·	
					
					<u>-</u> -
		<u></u>			
			<u> </u>		
f an amendment provides for an exch	anga raelassifi	cation or cane	allation of issued	Leharoe	
t an amendment provides for an exen	ndment if not c	ontained in the	amendment itse	elf:	
provisions for implementing the amer					
provisions for implementing the amer (if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					

05-05-2015	
The date of each amendment(s) adoption:	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 date will document's effective date on the Department of State's records.	not be listed as the
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)	
(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.	
05-05-2015 Dated	
Dated	
Signature anna like c	
(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)	
JANNA KIROVA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	