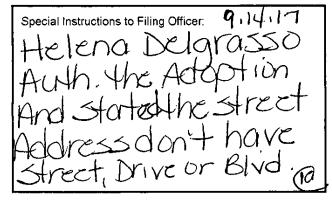
P17000417092

| (Requestor's Name) |
|-----------------------------------------|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |



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09/05/17--01011--012 **35.00



C. GOLDEN SEP 1 5 2017

COVER LETTER

Division of Corporations Boca Ration Ballroom dance compoun P17000047092 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Itelena DelGrosso. Boca Raton Ballroom Dance Company Boca Raton FL 33432
City/ State and Zip Code elena. Del Grosso Q gmail. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number 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 (Additional Copy enclosed)

Mailing Address

TO: Amendment Section

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

is enclosed)



September 13, 2017

HELENA DELGRASSO 346 ESPLANADE BOCA RATON, FL 33432

SUBJECT: BOCA RATON BALLROOM DANCE COMPANY

Ref. Number: P17000047092

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You can check only one (1) box regarding the adoption of amendment. Also, please list the complete street address wherever it appears in your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 217A00018530

Claretha Golden Regulatory Specialist II

www.sunbiz.org

Articles of Amendment

to

Articles of Incorporation

| Boca Katon | Ballroom | Dance | Comp | any |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------------------------|--------------------|--------------|
| (Name of Corpo | ration as currently filed w | vith the Florida Dept. | of State) | |
| P17 | 0000470 | 92 | | |
| (Do | ocument Number of Corpora | ation (if known) | | |
| Pursuant to the provisions of section 607.1006, Fk its Articles of Incorporation: | orida Statutes, this Florida | Profit Corporation ad | opts the following | amendment(s) |
| A. If amending name, enter the new name of th | <u>te corporation:</u> | | | |
| | | | 7 | The new |
| name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or | Corp," "Inc," or "Co". A | | rated" or the abb | reviation |
| B. Enter new principal office address, if application (Principal office address MUST BE A STREET A | | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | | | | |
| | | | | |
| D. If amending the registered agent and/or registered agent and/or the new register | | lorida, enter the nam | e of the | |
| Name of New Registered Agent | | | | |
| | | | | |
| | (Florida street addre. | ss) | | |
| New Registered Office Address: | | | Florida | |
| | (City) | | (Zip Co | de) |
| New Registered Agent's Signature, if changing | Registered Agent: | | | |
| I hereby accept the appointment as registered agei | | accept the obligations | of the position. | 2017 SE |
| S | Signature of New Registered | d Agent, if changing | SSEC. | FILE PIU |

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 | PT John D | <u>00e</u> | |
|-------------------------------|----------------------------------|------------------|---------------|
| X Remove | <u>V</u> <u>Mike J</u> | one <u>s</u> | |
| X Add | SV Sally S | <u>Smith</u> | |
| Type of Action (Check One) | Title | <u>Name</u> | Address |
| 1)Change | PD | Helena Delgrosso | 346 Esplanade |
| Add | | | Boca Katon FI |
| Remove | \wedge | | 33432 |
| 2) Change | 2 | <u> </u> | |
| Remove | · | | |
| 3) Change | | | |
| Add Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change Add | Mayorappengalook double dalla le | | |
| Remove | | | |
| 6) Change | | | |
| Add Remove | | | |
| IVO) HOVE | | | |

| attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
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| to Million and American | |
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| an amendment provides for an excharovisions for implementing the amen (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, and and an analysis |
| | |
| | |
| | |
| | |
| | |
| | |

| The date of each amendment(s) adoption: | , if other than the |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| date this document was signed. | • |
| Effective date if applicable: 8 31 117 | |
| 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 document's effective date on the Department of State's records. | e will 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): | at |
| "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 8/31/17 | |
| Signature Della Celanos | |
| (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) | |
| | |
| Helena Del Grosso | · |
| (Typed or printed name of person signing) | |
| President / Director | |
| (Title of person signing) | ·· · |