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SECRETARY OF STATE

2024 OCT -4 PH 12

## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPOR	RATION: Dance Therapy wit	h Sybil, Inc.		•		
DOCUMENT NUME	D19000033060		4 - 49	_		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	Sybil Stanonis					
		Name of Contact Person	1			
	Dance Therapy with Sybil, In	c.				
		Firm/ Company	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		Address				
		City/ State and Zip Code	e	<del></del>		
	E-mail address: (to be us	sed for future annual report	notification)	_		
For further information	n concerning this matter, pleas	se call:		77	2024 0	vez * es
Sybil Stanonis		at (813	731-9186	 3≻1-,	ĊŢ	- TET 19
Name	of Contact Person	Area Co	de & Daytime Telephone N	umber	+	
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State:		2024 OCT -4 PM 12: 5	77
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate 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)		?: 51	
Ame	iling Address endment Section ision of Corporations	Ameno	Address Iment Section on of Corporations			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the Florida Dept. of St	ate)		
Dance Therapy with Sybil, Inc.				
(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts t	he following amendm	ent(s) to	
A. If amending name, enter the new name of the corporation:				
Dance Time with Sybil. Inc		The nev	av	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name n	abbreviation "Corp., aust contain the word	 d	
B. Enter new principal office address, if applicable:	18125 US 41 Suite 204			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Lutz, FL 33549			
		2024	(4.5 <b>%)</b>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	17514 Hugh Lane	007 -4	7	
	Land O Lakes, FL 34638	. S S :	424, 144	
		<u> </u>		
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	dress in Florida, enter the name of	the		
Name of New Registered Agent				
(Florida s	treet address)			
New Registered Office Address:	. Flori	ida		
New Registered Office Address.	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	nt:	a position		
I hereoy accept the appointment as registered agent. I am jamuun	with tha accept the obligations of the	e przation.		
Signature of New	Registered Agent, if changing	<del></del>		
Check if applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	<del></del>			
Add				
Remove 2) Change			2024	
Add			DCT T	(ji 
Remove Change		<del>-</del>	<u> </u>	
Add				Comme
Remove 4) Change	<del></del> -			
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
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If 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)			
	<del></del> .		_
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			_

The date of each amendment(s) addate this document was signed.	loption:	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder action and s	shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
must be separately provided for  "The number of votes east by  Dated	rector, president or other officer—if directors or officers have not been diduciary by that fiduciary)  Standard Green or president or other officer of a receiver, trustee, or other court ed fiduciary by that fiduciary)  (Typed or printed name of person signing)	2024 OCT -4 PH 12: 51
	(Typed or printed name of person signing)	
	(Title of person signing)	<del> </del>