

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

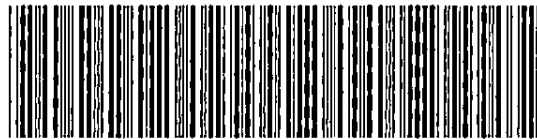
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600432814396

Journal of Management Education 30(6)br/>© The Author(s)
10.1177/0095647206289111
<http://jme.sagepub.com>

PH 1:00
STATE
SEE FL

7/11/24

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: All American Dance Factory, Inc
DOCUMENT NUMBER: P96000067795

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marlowe Inglis
Name of Contact Person
All American Dance Factory, Inc
Firm/ Company
4810 Arrowwood Drive
Address
Tampa, FL 33615
City/ State and Zip Code

marlowe@allamericandancefactory.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marlowe Inglis at 813, 480-3781
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|--|---|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
STATE
TALLAHASSEE, FL
JUN 11 PM 1:01

Articles of Amendment
to
Articles of Incorporation
of

All American Dance Factory, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

796000067795

(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 name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

4810 Arrowwood Drive
Tampa, FL 33615

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

Marlowe Inglis

4810 Arrowwood Drive

(Florida street address)

New Registered Office Address:

Tampa

(City)

Florida

33615

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Marlowe Inglis

Signature of New Registered Agent, if changing

Check if applicable

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

DEPT. OF STATE
TALLAHASSEE, FL

SEP 11 PM 1:01

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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☒ Change

P

Marlene Inglis

4810 Arrowwood Dr.
Tampa, FL 33615

☐ Add

☐ Remove

2) ☐ Change

P

Terri S. Howell

12438 Capi Circle N.
Treasure Island, FL 33706

☐ Add

3) ☒ Remove
☐ Change

S

David Howell

12438 Capi Circle N.
Treasure Island, FL 33706

☐ Add

☒ Remove

4) ☐ Change

S

Lee Inglis

4810 Arrowwood Dr.
Tampa, FL 33615

☒ Add

☐ Remove

5) ☐ Change

☐ Add

☐ Remove

6) ☐ Change

☐ Add

☐ Remove

STATE
MISSISSIPPI
11 PM 1:01

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

Additional article:

As of the effective date (June 2, 2024) documented in this
filed document, all authorized stock consisting of 500 shares
are transferred into the possession and joint ownership
of Marlowe Inglis and Lee Inglis with right of survivorship.

FILED
MAR 25 2024
STATE
FL

PM 1:01

F. 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)

N/A

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: 02 JUN 2024
(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 as the 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 incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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)"

Dated 02 JUN 2024

Signature Terris S. Howell

(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)

Terris S. Howell

(Typed or printed name of person signing)

President

(Title of person signing)

2024 JUN 11 PM 1:01
OFFICE OF THE
CLERK OF THE
DEPARTMENT OF
STATE
TALLAHASSEE, FL