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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 12/14/2015 1:16 PM Fee Receipt: \$8.00

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov Pursuant to the provisions of KRS 1 purpose, submits the following state 1. The name of the corporation on re The Kentucky Shakespe (The name must be Identical to the name	ecord with the Office of the Secretary of State is:	amend articles and, for that
(502) 564-3490 www.sos.ky.gov Pursuant to the provisions of KRS 1 purpose, submits the following state 1. The name of the corporation on re The Kentucky Shakespe (The name must be Identical to the name	ments: ecord with the Office of the Secretary of State is:	amend articles and, for that
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purpose, submits the following state 1. The name of the corporation on re The Kentucky Shakespe (The name must be identical to the name	ments: ecord with the Office of the Secretary of State is:	amend articles and, for that
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The Kentucky Shakespe (The name must be identical to the name	and final cartifolds to the first and the first cartifold and the first the	
(The name must be identical to the name	are Festival Inc	
2. The text of each amendment add	pted: The name of this corporation, w	nich was previously
"The Kentucky Shakesp	eare Festival, Inc.", is hereby amend	ed to "Kentucky
Shakespeare Inc."		*
	November 17, 2015	
The date of adoption of each ame	ndment was November 17, 2015	
4. Check either a, b or c (whichever is	applicable):	
a. ✓ The amendment(s)	was (were) duly adopted by a quorum present at sucl	n meeting and that such
amendment received at least	t two-thirds (2/3) of the votes which members presen	
by proxy were entitled to case b. The amendment(s)	it. was (were) duly adopted by consent in writing and wa	as (were) signed by all members
entitled to vote with respect	hereto.	
c. The amendment(s) the vote of a majority of the	was (were) duly adopted by the board of directors and directors in office since there are no members or men	d such amendment(s) received and about the such amendment(s) received and such amendment(s) r
	oon filing, unless a delayed effective date and/or time	
or the delayed effective date cannot	be prior to the date the application is filed. The date	and/or time is
340		(Delayed effective date and/or time)
I declare under penalty of periury un	der the laws of Kentucky that the forgoing is true and	correct.
1111 1 1		
Phillip V. an		Chairman 11/23/15
Signature of officer or Chairman of the Bo	ard Printed Name	Title Date

(01/12)