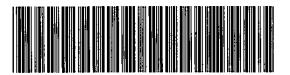
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(Re	equestor's Name)	
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SM STRI	NGMASTE	RS, INC.	
DOCUMENT NUMBER: N1400001	1157		
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
MARTA M. FUERTES			
	(Name of Contact Person	n)	र्रेष्ट्र इ
	(Firm/ Company)		 ·
12186 SW 131 AVENUE	=		
	(Address)		
MIAMI, FL 33186			3. •
	(City/ State and Zip Cod	e)	
mmfuertes@mfue	•		_
E-mail address: (to be use	•	notification)	
For further information concerning this matter, please	_		
MARTA FUERTES	_{at (} 786	344-6164 ode & Daytime Telephone N	
(Name of Contact Person)	(Area C	ode & Daytime Telephone N	lumber)
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$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	Ameno Divisio Cliftor 2661 E	Address dment Section on of Corporations n Building Executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

SM STRINGMASTERS, INC.		
(Name of Corporation as currently filed with the Florida Dept. of State)		
N1400001157		
(Document Number of Corporation (if known)		
Tursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation amendment(s) to its Articles of Incorporation:	dopts the fo	ollowing
. If amending name, enter the new name of the corporation:		
COBRA ORCHESTRA PARENTS ASSOCIATION, INC.		The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Company" or "Co." may not be used in the name.	"Corp." or	"Inc."
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		h
(muting dualess mat be a rost of tree box)		16 Prom
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	<u>e</u>	
new registered agent and/or the new registered office address:		(2) (2)
Name of New Registered Agent:	Şe i	တိ
(Florida street address) New Registered Office Address:		
(City), Florida	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the		

Page 1 of 4

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.

		orporation, Sally Smith is named the Villy Smith. SV as an Add.			-FF
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith			Tuesday
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	<u>. 26</u>	
1) Change					_
Add Remove					_
2) Change					_
Add					- -
3) Change					_
Add Remove					
4) Change					_
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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	date of each amendm		, if ot	her than the
	this document was sign			
Effe	ective date <u>if applicabl</u>	(no more than 90 days after amendment file date)		
Ado	option of Amendment(s) (<u>CHECK ONE</u>)		
	The amendment(s) wa was/were sufficient for	s/were adopted by the members and the number of votes cast for the amendment(s) approval.		
	There are no members adopted by the board	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.		
	Dated N	OVEMBER 11, 2014		
	Signature	Il faith the sur	'nį	
	(By	the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	_ 香。。。	
	MAR	TA FUERTES	,	ه <u>در</u> د او
		(Typed or printed name of person signing)	35	' A = " ³
	PRE	SIDENT	- 27	
		(Title of person signing)		