N20000010302

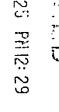
(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
☐ PICK-UP	☐ WAIT	☐ MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

Josef Gingold Chamb	ber Music Festival, Inc.
NAME OF CORPORATION:	
N20000010302	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are subn	mitted for filing.
Please return all correspondence concerning this matter Gary Levinson	er to the following:
	(Name of Contact Person)
Josef Gingold Chamber Music Festival, Inc.	
	(Firm/ Company)
19607 Bent Brook Court	
	(Address)
Dallas, TX 75252	
	(City/ State and Zip Code)
gary@glevinson.com	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
Gary Levinson	469 9645939
·	at
(Name of Contact Person)	
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

	Article	s of Incorporation	prz.
		of	LED
(Name of Corporation as currently filed with the	a Florida I	Pant of State)	2013 SEP 25
N20000010302.	e i ioriua i	ept. of State	2023 SEP 25 PH 12: 29
(Docum	nent Numb	er of Corporation (if known)	LLAIN STATE
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statut	es, this <i>Florida Not For Profi</i>	Corporation adopts the following
A. If amending name, enter the new name of the	e corporat	ion:	
			The new
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name	•	tion" or "incorporated" or th	e abbreviation "Corp." or "Inc."
-		2412 NE 10th Street	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		Hallandale Florida	
		33009	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	2412 NE 10th Street, Halland	dale FL 33009
D. If amending the registered agent and/or regis	stered offi	ce address in Florida, enter t	the name of the
new registered agent and/or the new register			
Name of New Registered Agent:	Gary Levi		
	2412 NE	10th Street Hallandale, FL 330	
<u>New Registered Office Address:</u>		(Florida stre	et address)
New Neglistered Office Hadress.	2412 NE	10th Street Hallandale	33009 , Florida
	<u>-</u> .	(City)	(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen			gations of the position.
ـ بي	Si	gnature of New Registered Ag	ent, if changing

16		Discrete second and second second of analysis	h officent/director being removed and title name
and address of each Off (Attach additional sheets, Please note the officer/di P = President; V = Vice I	icer and/o , if necesson rector title President; = Chief Fi	or Director being added: ary) by the first letter of the office title: T= Treasurer; S= Secretary; D= Director; nancial Officer. If an officer/director holds	TR= Trustee; C = Chairman or Clerk; CEO = Chief more than one title, list the first letter of each office
Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	wes the co	rporation, Sally Smith is named the V and S	d as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	Robert Smith	6620 SW70 lane Miami, FL 33143
x Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			

____ Remove

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

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. —	· · · · · · · · · · · · · · · · · · ·	
	September 13, 2023	
The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
Effective date if applicable:		
and in approximate.	(no more than 90 days after amendment file date)	
		17
Note: If the date inserted in this block doe document's effective date on the Departme	es not meet the applicable statutory filing requirements, this date will not be ent of State's records.	e fisted as the
Adoption of Amendment(s)	(CHECK ONE)	

■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
Dated 9/19/23				
Signature Signature				
Dy the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
Gary Levinson				
(Typed or printed name of person signing)				
Vice President				
(Title of person signing)				