## 746280

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## **COVER LETTER**

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Gloria Musicae, Inc		_
DOCUMENT NUMBER: 1	746280		
The enclosed Articles of Am		-	
Please return all corresponde	nce concerning this matter	to the following:	
Susan Burke			
<del></del>	(	Name of Contact Person	n) .
Choral Artists of Sarasota, I	nc.		
· · ·	-	(Firm/ Company)	<del>-</del>
P.O. Box 52987			
		(Address)	
Sarasota, FL 34232			
	(	City/ State and Zip Cod	e)
director@ChoralArtistsSara	sota.org		
E	-mail address: (to be used	for future annual report	notification)
For further information conc	erning this matter, please o	all:	
Susan Burke			1.387.6046
	(Name of Contact Person)		rea Code) (Daytime Telephone Number)
Enclosed is a check for the fe	ollowing amount made pay	able to the Florida Depa	artinent of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & C Certificate of Status		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
P.O. Box 6	nt Section f Corporations	Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation of

Articles	of Amendment	
	to	2 1
Articles	of Incorporation	0/9. //
Gloria Musicae, Inc	of	tate)
(Name of Corporation as current	ly filed with the Florida Dept. of S	itate)
746280		366 Mg
(Document Numbe	r of Corporation (if known)	(A) (A)
Pursuant to the provisions of section 617,1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Corpo</i>	ration adopts the following
A. If amending name, enter the new name of the corporation	on:	
	Choral Artists of Saraso	ota, Inc. The new
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbre	viation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	1226 N. Tamiami Trail, S	uite 300
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Sarasota, FL 34236	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 52987 Sarasota, FL 34232	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	ldress:	ne of the
Name of New Registered Agent: Susan	Burke	
	N. Tamiami Trail, Suite 300 (Florida street addre	.252)
New Registered Office Address:		
Saras	sota	, Florida <u>34236</u>
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent. I am fan		s of the position.
	Susan Burle	

Signature of New Registered Agent, if changing

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jor Sally Sm	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	<del></del>	_		
Remove				
2) Change		_		
Add				
3 ) Change Add		- <del>-</del>		
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)	
	<del></del>
<u> </u>	
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	<del></del>
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment jile date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ot be listed 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 November 19, 2019	
Signature	
(By 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)	
Bill Kimbell	
(Typed or printed name of person signing)	
President	
(Title of person signing)	