713982

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Friday Musicale, Inc	
DOCUMENT NUMBER: 713982	
The enclosed Articles of Amendment and fee are subt	mitted for filing.
Please return all correspondence concerning this matte	er to the following:
William Roelke, Esq.	
	(Name of Contact Person)
Friday Musicale, Inc.	
	(Firm/ Company)
645 Oak Street	
	(Address)
Jacksonville, Florida 32204	
	(City/ State and Zip Code)
wroelke@yahoo.com E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
William Roelke	at 904 234-5800
(Name of Contact Person	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable 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 Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Friday Musicale, Inc.		2022 AUG 3 PM 12: 25 -
Name of Corporation as currently filed with the Flor	ida Dept. of State)	
713982		Known)
(Document N	lumber of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida Not F</i>	for Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oor <u>ation:</u>	
N/A		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporate	vd" or the abbreviation "Corp." or "Inc."
	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		a, enter the name of the
Name of New Registered Agent: N/A		
	· · · · · · · · · · · · · · · · · · ·	Florida street address)
<u>New Registered Office Address:</u>		
<u>N/A</u>	<u>-, _</u>	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist		
I hereby accept the appointment as registered agent. I a	m familiar with and accep	t the obligations of the position.
	Signature of New Regis	tered 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: X Change X Remove X Add	PT John De V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add X Remove	<u>T</u>	Brenda Dirkse	645 Oak Street Jacksonville, FL 32204
2) Change Add	D	Lisa Kelly	645 Oak Street Jacksonville, FL 32204
X Remove 3) Change Add X Remove	Executiv	Jonathan Lacey	Jacksonville, FL 32204
4) Change Add	<u>D</u>	Clifford Newton	Jacksonville, FL 32204
Remove 51 Change X Add Remove	ED	Daniel Stark	645 Oak Street Jacksonville, FL 32204
6) Change Add			
E. If amending or addin (attach additional shee	g additional Artic ts, if necessary).	cles, enter change(s) here; (Be specific)	
N/A			

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	<u> </u>
	
	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
Effective date <u>if applicable</u> : too more than 90 days after amen	dment file date)
Note: If the date inserted in this block does not meet the applicable statutor 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 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 08/27/2022 Signature Mullum Hallly				
(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)				
William L. Roelke, Jr.				
(Typed or printed name of person signing)				
Chairman of the Board				
(Title of person signing)				

2077 AUG 31 PM 12: 25