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TRANSMITTAL LETTER

ro: Registration Section Division of Corporations	
SUBJECT: The V.O.I.C.Experience Foundation (Name of Corporation - must include suffix)	The second secon
Dear Sir or Madam:	
The enclosed "Application by Foreign Not for Profit Corporation for Authorization to C Affairs in Florida", "Certificate of Existence", and check are submitted to register the at not for profit corporation to conduct its affairs in Florida.	onduct its ove referenced
Please return all correspondence concerning this matter to the following:	
Brad Jacobs, Esq. (Name of Person)	- Jan Jan Harat La
(4.2.2.2.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4	•
McLaughlin & Stern, LLP (Firm/Company) 1000-	\$5975017 8/0101080001
260 Madison Avenue, 18th Floor ***********************************	******87.50 ***
(Address)	wol-220∞
New York, NY 10016 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Brad Jacobs, Esq. at (212) 448-1100 ext. (Name of Person) (Area Code & Daytime Telephore)	106 ne Vumberd
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	FILED OCT -8 PN 9: 11 RETARY OF STATE ANASSEE, FLORIDA
□ \$70.00 Filing Fee □ \$78.75 Filing Fee &	\$87.50 Filing Fee, Certificate of Status & 18 Certified Copy

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 21, 2001

BRAD JACOBS 260 MADISON AVE., 18TH FL NEW YORK, NY 10016

SUBJECT: THE V.O.I.C. EXPERIENCE FOUNDATION

Ref. Number: W01000022000

We have received your document for THE V.O.I.C. EXPERIENCE FOUNDATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or vour filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6097.

Michael Mays Document Specialist

Letter Number: 601A000529

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

The V.O.I.C. Experience Foundation	Täau			
The V.O.I.C. Experience Foundation (Name of corporation: must include the word "INCORPOR in language as will clearly indicate that it is a corporation in present. "Company" or "Co." may not be used as a corporat	ATED	" or "CORPORATION" of a natural person or part x by a nonprofit corporat	or words or a neaship if no ion.)	abbreviations of like import
2. New York	3	13-4145412	·	
(State or country under the law of which it is incorporated))	(FEI number, if applicable)		
4. <u>November 22, 2000</u>	_, 5	Perpetual		
(Date of Incorporation)		(Duration: Year corp	will cease t	ti exist or "perpetual")
5. June, 2001	_			
(Date corporation first conducted Affairs in Florida -	See se	ctions 617.1501, 617.15()2, and 817.1	55, F.S.)
7. c/o Newson & Haberman, 225 W, 34rh	Stre	et Suita 2007	Now York	י אדט זרטטט
(Frincis	ранеп	ice address)	140-74-15-11-P	v a 111111111111111111111111111111111111
P.O. Box 22016, Lake Buena Vista, F.	L 32	830		
(Curren	at mani	ng address)		
Please see attached Rider				,
(Purpose(s) of corporation authorized in hor	me sta	te or country to be carried	out in the st	ite of Florida)
9. Name and street address of Florida registered ager	nt: (P	O. Box or Mail Drop I	Box <u>NOT</u> a	TARY
		•		E P
Office Address: 174 Springfield Pass		F =		— U) —
				9: 1 TATE ORID
Dgvenport (City)	<u>,</u>	Florida <u>33837</u>	in a second	XE I
Cuy			(Zip Code)	
10. Registered agent's acceptance: Having been named as registered agent and to accept designated in this application, I hereby accept the ap I further agree to comply with the provisions of all states, and I am familiar with and accept the obligate	ppoint statut	ment as registered ago es relative to the prope	ent and agr	ee to act in this capacity.
Heat	,		_	<u>.</u>
(Register	ted age	nt's signature)		

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS *

Chairman:_	Sherrill Milnes			
Address:	6514 North Kilbourn			
	Lincolnwood, IL 60712		-	
Vice Chain	man: Maria Zouves			
Address:	6514 N. Kilhourn			
	Lincolnwood, IL 60712			·
Director:	Stephen Scovasso			
Address:	174 Spcingfield Pass			,-
	Davenport, FL 33837			-1112
Director:	Elizabeth Gannon			-
Address:	2032 Belmont Road, N.W.		,	
	Washington, DC 20009		ware days	
Please see B. OFFI	e attached Rider CERS			
President:_	Sherrill MiTnes			 -
Address:	6514 North Kilbourn	= 0		
_	Lincolewood, IL 60712	SECK ALLU		
Vice Presid	dent: Maria Zouves	¥E.	0CT	T
Address:	6514 North Kilbourn	RYC	φ.	
_	Lincolnwood, IL 60712	FST FST	₹	U
Secretary:	Stephen Scovesso	DATE ORID	÷	
Address:_	174 Springfield Pass, Davenport, FL 33837			
Treasurer	Elizabeth Gannon			
Address:_	2032 Relmont Road, N.W., Washington, DC 20009			
NOTE:	f necessary, you may attach an addendum to the application listing additional officers and the supplication listing additional officers and the supplication listing additional officers and the supplication listing additional officers are supplication listing additional officers are supplied in			,
/ _M	(Signature of Chairman, Vice Chairman, of any officer listed in number 12 of the faria Zouves, Vice Chairman & Vice President	ippiicatio	n)	
14	(Typed or printed name and capacity of person signing application)			

RIDER TO APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

THE V.O.I.C.EXPERIENCE FOUNDATION FEI NUMBER: 13-4145412

Question 8.

The purposes for which The V.O.I.C. Experience Foundation is formed are to:

- a. Organize and operate seminars, master classes coached by eminent vocal artists, discussion panels and lectures on voice, stage, management, vocal competitions and alternative classical musical careers:
 - b. Thereby support and advance the classical vocal arts; and
- c. Do any and all things necessary, suitable, lawful and proper for the accomplishment of these purposes.

Question 12.

Director:

Catherine Fagan

Address:

16 Edward Street

Medford, MA 02155

FILED

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SECRETARY OF STATE
AHASSEE, FLORIDA

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of THE V.O.I.C.EXPERIENCE FOUNDATION was filed on 11/22/2000, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 22nd day of August two thousand and one.

OF Special Deputy Secretary of State

SECRETARY OF STATI
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