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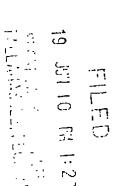
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JUN 2 2 2019 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SUNCOAST HARMONY CHORUS INC
DOCUMENT NUMBER: NO10000 4228
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LINDA R. LONG
(Name of Contact Person)
(Firm/ Company)
4269 AZORA RD
(Address)
SPRING HILL FL 34608
(City/ State and Zip Code)
LLBOKEPR @GMAIL, COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LINDA R. LONG at 352-346-1339 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$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 Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation
of

SUNCUAST HARMON	of Villa	115 (110		
(Name of Corporation as curr				
N 0100000 4		, , , , , , , , , , , , , , , , , , ,		
	mber of Corporation	(if known)		
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	utes, this <i>Florida No</i>	t For Profit Corporation a	dopts the fe	ollowing
A. If amending name, enter the new name of the corpor	ration:			
name must be distinguishable and contain the word "corpo	madina H Mi			The new
"Company" or "Co." may not be used in the name.	ration or incorpoi	raiea or ine aporeviation	Corp. or	inc.
B. Enter new principal office address, if applicable:				
Principal office address <u>MUST BE A STREET ADDRES</u>	<u>s</u>)			
			2:-:	9
	-	<u> </u>	<u>;-</u> ;-	-
C. Enter new mailing address, if applicable:			77.5	<u></u>
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			• •	_
			£71 :-	
			1.5	5
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		ida, enter the name of the	<u>!</u>	
				
Name of New Registered Agent:				
		(17		
New Registered Office Address:		(Florida street address)		
		Elo rid a		
	(City)		, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registere	d Aconti	•		
hereby accept the appointment as registered agent. I am		cept the obligations of the p	osition.	
	Signature of New Re	gistered 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	<u>V</u> <u>Mil</u>	<u>n Doe</u> ke Jones ly <u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	P	RITA COX	11611 PAMPAS DR NEW PORT PICHEY FL 34654
2) Change Add	<u>S</u> _	SUE CARPER	NEW PORT RICHEY
Remove 3) Change Add Remove	Ρ	BARBARA KARPAY	FL 34454 3601 LAKE PADGETT LAND O'LAKES FL 34639
4) Change Add Remove	<u>S</u> _	JANIS SPECK	
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
	<u> </u>
····	
 	
	

The date of each amendment(s) adoption: MAY 30, 2019, if other than date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 6-1-2019
Signature Kinda R. Kong
(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)
LINDA R. LONG
(Typed or printed name of person signing)
TREASURER
(Title of person signing)

than the