

NO2000007663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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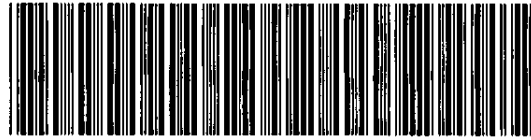
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 FEB 27 AM 11:17

C. LEWIS
3-3-15
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 20, 2014

VITO (VIC) N. SILVESTRI, PHD / THE BACH ENSEMBLE INC
6017 PINE RIDGE RD #96
NAPLES, FL 34119 US

SUBJECT: THE BACH ENSEMBLE, INCORPORATED
Ref. Number: N02000007663

We have received your document for THE BACH ENSEMBLE, INCORPORATED and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 214A00017974

The Bach Ensemble

*Ginny Goodman President
Peter Hastings Hutchings,
Artistic Director and Conductor
Dr. Vic Silvestri, Founder*



6017 Pine Ridge Rd #96,
Naples, FL 34119
239-732-1055
www.thebachensemble.org

August 4, 2014

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

To Whom It May Concern:

The Board of Directors of The Bach Ensemble, Inc. submits the attached cover letter of changes, additions and removals of its membership as of August 4, 2014.

A check for \$35.00 is attached to the document.

Vito (Vic) N. Silvestri, Ph.D.
Vito (Vic) N. Silvestri, Ph.D.
Founder and Secretary for the
Board of Directors

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: **The Bach Ensemble, Inc.**

DOCUMENT NUMBER: **NO2000007663**

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Vito (Vic) N. Silvestri, Ph.D.

(Name of Contact Person)

Founder, The Bach Ensemble, Inc.

(Firm/ Company)

6017 Pine Ridge Road #96

(Address)

Naples, Florida 34119

(City/ State and Zip Code)

vnsilvestri@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ginny Goodman, President at **(239) 221-8550**

(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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 FEB 27 AM 11:17

The Bach Ensemble, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

NO2000007663 (EIN: 51-0429031)

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

NA

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

NA

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

NA

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Vito (Vic) N. Silvestri, Ph.D.

3667 Arctic Circle, Naples, FL 34112

(Florida street address)

New Registered Office Address:

na

(City)

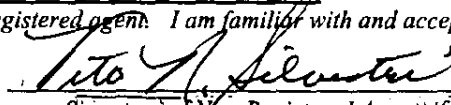
, Florida

na

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


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:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|--------------|--------------------------------|---|
| 1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>P</u> | <u>Carol Hedman</u> | <u>26700 Lost Woods Circle</u> <u>Bonita Springs, FL 34135</u> |
| 2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>P</u> | <u>Ginny Goodman</u> | <u>21310 Lancaster Run # 1015</u> <u>Estero, FL 33928</u> |
| 3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>V</u> | <u>Nancy Damico</u> | <u>92 Thorncrest Lane</u> <u>Naples, FL 34113</u> |
| 4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>V</u> | <u>Julia Bugera</u> | <u>660 6th. Ave N</u> <u>Naples, FL 34102</u> |
| 5) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>S</u> | <u>Jennie Tracey</u> | <u>569 Park Shore Drive</u> <u>Naples, FL 34103</u> |
| 6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>S</u> | <u>Vito (Vic) N. Silvestri</u> | <u>3667 Arctic Circle</u> <u>Naples, FL 34112</u> |

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

| | |
|-----------------------------|----------------------------|
| R: D Suzanne Cherney | 115 Plantation Circle |
| | Naples, FL 34104 |
| A: D Paul Martin | 3956 Upolo Lane |
| | Naples, FL 34119 |
| R: D Marianne Micco | 289 Quail Forest Blvd #315 |
| | Naples, FL 34105 |
| A: D David Ready | 2857 Mizzen Way |
| | Naples, FL 34109 |
| A: D Mike Dias | 7028 Leopardi Court |
| | Naples, FL 34114 |
| R: D Ronald Doiron | 3461 Anguilla Way |
| Artistic Director | Naples, FL 34119 |
| A: Peter Hastings Hutchings | 279 Bimini Ave. |
| Artistic Director | Marco Island, FL 34145 |
| Continuing as Treasurer: | Fred Poulter |
| | 4564 Andover Way |
| | Naples, FL 34112 |
| | |
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| | |
| | |
| | |
| | |

The date of each amendment(s) adoption: na
date this document was signed. FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
if other than the

Effective date if applicable: na
(no more than 90 days after amendment file date) 15 FEB 27 AM 11:17

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 August 4, 2014

Signature Vito (Vic) N. Silvestri, Ph.D. Founder + Secretary of Board of Directors
(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)

Vito (Vic) N. Silvestri, Ph.D.

(Typed or printed name of person signing)

Founder, and Secretary of Board of Directors

(Title of person signing)