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SECRETARY SESSIONS

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COVER LETTER

TO: Amendment Section Division of Corporations

The Villages Philh	parmonic, Inc.
N03000008993	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub-	omitted for filing.
Please return all correspondence concerning this matter	ter to the following:
Pasquale Valerio	
	(Name of Contact Person)
	(Firm/ Company)
Post Office Box 590	
	(Address)
Oxford, FL 34484	
	(City/ State and Zip Code)
pasmusica60@aol.com	
E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, please	g call:
Marcella Richardson	352 504-5409
(Name of Contact Person	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
■ \$35 Filing Fee □S43.75 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 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

The Villages Philharmonic, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N03000008993 (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: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: tFlorida street addressi New Registered Office Address: _, Florida (Zip Code) (City) 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 Agent Signature of New Registered Agent Signature of New Reg

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	$\underline{V} = \underline{Mik}$	n Doe e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
X Change	VP.D	Velardi, Antonio	PO Box 590
Add			Oxford, FL 34484
Remove			
2) X Change	VP.Ď	Workowski, Keith	PO Box 590
Add			Oxford, FL 34484
Remove			
3) X Change	S,T,D	Leonhirth, Sharron	PO Box 590
Add			Oxford, FL 34484
Remove			
4) Change	P, D	Richardson, Marcella	12133 CR 209
X Add			Oxford, FL 34484
Remove			
51 Change	P,D	Watson, James	PO Box 590
Add			Oxford, FL 34484
X Remove			
6) Change	T,D	Díck, Maggie	PO Box 590
Add			Oxford, FL 34484
X Remove			
			

. 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 A Add	<u>V</u> <u>Mi</u>	on Doe ke Jones Ilv Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
X Change	D 	Spinelli. Michael	PO Box 590
Add			Oxford, FL 34484
Remove			
8) Change	D	Alex, Ramos	7936 Number Two Road
XAdd			Howey-in-the-Hills, FL 34737
Remove			-
9) Change	D	Bernardini, Augusto	8745 Windsor Pointe Drive
<u> </u>			Orlando, FL 32829
Remove			
[9 Change	D	Incorvaia, Tom	3284 Dzuro Drive
X Add			Oxford, FL 34484
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)				
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July 27, 2018	
The date of each amendment(s) adoption:late this document was signed.	, if other than the
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 dat document's effective date on the Department of State's records.	e will not 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 amendme was/were sufficient for approval.	ent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/we adopted by the board of directors.	rre
Dated Signature July 27, 2018	
(By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	
Pasquale Valerio	
(Typed or printed name of person signing)	
Chairman	
(Title of person signing)	_