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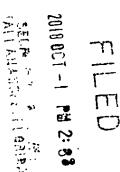
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Fort Lauderdale Sympon:	ohonie Winds, Inc		
DOCUMENT NUMBER:	N05000001325			
The enclosed Articles of An	nendment and fee are subm	itted for filing.		
Please return all correspond	ence concerning this matter	to the following:		
Carlos Pinera				
		Name of Contact Pe	rson)	
Fort Lauderale Symphonic	Winds, Inc			
-	-	(Firm/ Company)	
7433 Silver Woods Ct				
		(Address)		
Boca Raton, FL, 33433				
	(City/ State and Zip (Code)	
worf@bellsouth.net				
[·	-mail address: (to be used	for future annual rep-	ort notification)
For further information conc	erning this matter, please c	all:		
Carlos Pinera		at	954	850-6509
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida D	epartment of a	State:
S35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status		Certiti Certiti) Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	<u>.ddress</u>	Str	eet Address	

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

Fort Lauderdale Symphonic Winds, Inc				
(Name of Corporation as	s currently	y filed with the F	lorida Dept. of St	ate)
N05000001325				
(Docume	mt Number	of Corporation (i	f known)	
tursuant to the provisions of section 617,1006. Florid mendment(s) to its Articles of Incorporation:	la Statutes.	this <i>Florida Not</i>	For Profit Corpor	ration adopts the following
If amending name, enter the new name of the c	orporation	n:		
				The new
ame must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	corporatio	on" or "incorpore	ited" or the abbrev	
3. Enter new principal office address, if applicable				
Principal office address <u>MUST BE A STREET AD</u> i	<u>DRESS</u>)			
	_			500
	_			
. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u>9X</u>)			
	-			~
	-	 -		
If amending the registered agent and/or registe	ered office	address in Flori	da, enter the nam	e of the
new registered agent and/or the new registered				
Name of New Registered Agent: S	Sally Craig			
	OS Lake Hi	merald Drive , #5		
-			tFlorida street addres	
New Registered Office Address:			criman sireet addres	''
	akland Pa	rk		
_		(City)	·	Florida (Zip Code)
		•		(131) Contry
ew Registered Agent's Signature, if changing Reg			and the set the set	afat a cartet
hereby accept the appointment as registered agent.	i am fami	uar wiin and acc	epi ine obligations \$\iint \cap \cap \cap \cap \cap \cap \cap \cap	of the position.
		1015	5/ (1)	7,0

Page 1 of 4

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.

X Change X Remove X Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Jim McGonigal	7451-6 S. ARAGON BLVD
Add			Sunrise, FL 33313
X Remove			
2) Change	<u>v</u>	Michele Nicklas	504 Gardens Drive
A Add			Арт 104
Remove			Pompano Beach, FL 33069
3) Change	S	Wendy Powell	6710 Tyler St
Add			Hollywood, FL 33024
X Remove			
4) Change	8	Anne Orvieto	209 N Birch Rd
XAdd			#502
Remove			Fort Lauderdale, FL 33304
5) X Change	P	Sally Craig	105 Lake Emerald Drive
Add			#516
Remove			Oakland Park, FL, 33309
6) Change			
Add			
Remove			

. If amending or adding additional Art (stach additional sheets, if necessary).	(Be specific)				
					
					
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			A ₁₁		
	· -				

		August 1, 2018	
	e date of each amendment(s) a e this document was signed.	doption:	_, if other than the
Effe	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this blument's effective date on the D	ock does not meet the applicable statutory filing requirements, this date will not epartment of State's records.	be listed as the
Adoption of Amendment(s)		(<u>CHECK ONE</u>)	
	The amendment(s) was/were a was/were sufficient for approx	dopted by the members and the number of votes cust for the amendment(s) al.	
	There are no members or men adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
	Dated	9/27/201t	
	Signature		_
	have not be	rman or vice chairman of the board, president or other officer-if directors sen selected, by an incorporator – if in the hands of a receiver, trustee, or appointed tiduciary by that (iduciary)	
	Carlos 1	Pinera	
		(Typed or printed name of person signing)	
	Treasur	er en	
		(Title of person signing)	