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C. GOLDEN APR - 6 2019

COVER LETTER

TO: Amendment Section Division of Corporations

Name of Corporation

NO9000003717

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Robin Fennema Name of Contact Person Tallahassee Youth Orchestras Firm/Company 9837 Dulce Maria Dr Address Tallahassee Fl 32317 City/State and Zip Code

tyodirector@gmail.com

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

For further information concerning this matter, please call:

Robin Fennema at (850 894-1304 Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	unge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of	r Florida	-
1. The name of t	the corporation: Tallahassee Y	outh Orchestras, Inc.		
2. The principal	office address: 9837 Dulce M	aria Dr.		
Tallahass	see FL 32317			
3. The mailing a Tallahas	address (if different): P. O. Box ssee, FL 32316	21104		
4. Date of incorp	poration/qualification: 04/14/20	09 Document number: N090	00003717	
	I street address of the current registement of State: (If resigned, enter re	cred agent and registered office on file vesigned)	with the	
	Ivey, Aisha S		_	
	1802 Pepper Drive		2019	
	Tallahassee FL 32304	2.00	2019 HAR 29	(a)
6. The name and (if changed):	d street address of the new registere	d agent (if changed) and /or registered o	office.	
	Robin Fennema		_ <u>-</u> 5	
	9837 Dulce Maria Dr.		· v o	
	Tallahassee FL 32317	ox NO1 acceptable		
	Tallallassee FL 32317		-	
The street address changed will	ess of its registered office and the s be identical.	street address of the business office of i	its registered age	nt,
Such change wa authorized by th	as authorized by resolution duly ad ne board, or the corporation has be	lopted by its board of directors or by an en notified in writing of the change.	officer so	
		Jason Gaitanis, Treasu		
12	re of an officer or director	Printed or typed name and ti	itle	-
I further agree i pertormance of	to comply with the provisions of all my dulies, and I am familiar with	ent and agree to act in this capacity, it statutes relative to the proper and cor and accept the obligation of my position of reposition of the properties of the registered offi- fied in writing of this change.	m as registered	
login	Penrana	3/23/2019		
Sign	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Ту	sped or Printed Name			

* * * FILING FEE: \$35.00 * * *