## Magagan

(Red	questor's Name)		
(Add	dress)		
(Add	dress)		
(City	//State/Zip/Phone	· #)	
PICK-UP	☐ WAIT	MAIL.	
(Bus	siness Entity Nam	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to I	Filing Officer:		

Office Use Only



900280803659

01/19/16--01010--018 \*\*35.00

20

JAN 20 2016

R. WHILE

STREETARY OF STA

## **COVER LETTER**

TO: Amendment Section •

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Florida Opera Theatre, Inc.
DOCUMENT NUMBER: <u>NO900005774</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Judith H. Thompson (Name of Contact Person)
Opera Orlando, Inc. (Firm/Company)
(Firm/ Company)
210 Pine Cone Lane
(1344355)
Longwood FL 32779  Gity/ State and Zip Code)  GPREISSER  OPEraor lando. org  Mail address: (to be used for future annual report notification)
(City/ State and Zip Code)
approximate operation do ora
mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
John Wettach (Name of Contact Person)  at 407 782-6336 (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
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

to

Articles of Incorporation of

16 JAN 19 PM 9: 10 SECRETARY OF STATE TALLAHASSEE FLURIDA

torida Opera	I heatre,	Inc.
(Name of Corporation as cur	rently filed with the Flori	da Dept. of State)
N0900000	05774	
	imber of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
Opera Orland	- Tac.	The
name must be distinguishable and contain the word "corpo	oration" 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 ADDRES)	N/A	
<u></u>	<u> </u>	
		,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NI/A	
(maung address MAT BE ATOST OFFICE BOX)		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.		enter the name of the
	/ a	
Name of New Registered Agent:	N/ /+	
New Registered Office Address:	(Fle	orida street address)
New Negistered Office Nauress.		,
	(0)	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register		
I hereby accept the appointment as registered agent. I an	n familiar with and accept	the obligations of the position.
	NA	
<del></del>	Signature of New Regist	ered 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	PT         John D           V         Mike J           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change  Add  Remove	<u>_P</u>	Judith Lee	12 Barnard Ct. Maitland, F1 32751
2) Change Add	<u>_P</u>	John T. Wettach, Tr.	1306 Green Cove RS Winter Park, FL 32789
Remove 3) Change Add	<u>V</u>	Gabriel Preisser	626 Hearthglen Blvd. Winter Garden, FL 34787
Remove  4) Change  Add Remove		Vincent Connor	676 Hearthglen Blvd Winter Garden, FL34787
5) Change Add Remove	-N	1	
6)ChangeAddRemove		TA	
		Page 2 of 4	

E. If amending or adding additional Articles, enter change(s) here:	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
N/A	
	_
1	
	_
· · · · · · · · · · · · · · · · · · ·	—
<del></del>	—
<del> </del>	—
	_
	_
	_
<del> </del>	_
	_

The date of each amendment(s) add date this document was signed.	option: December	er 17, 2015	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after	12, 2016 amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep		atutory filing requirements, this o	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
☐ The amendment(s) was/were add was/were sufficient for approval	lopted by the members and the nur	nber of votes cast for the amend	ment(s)
There are no members or membadopted by the board of director	pers entitled to vote on the amendnors.	nent(s). The amendment(s) was	were 'were
Dated	2/16		
By the chairr have not bee	man of vice chairman of the board en selected, by an incorporator—if appointed fiduciary by that fiducian		
<u>_</u> フ	Tohn T. Wettac (Typed or printed n	name of person signing)	
	President		

(Title of person signing)