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(Ac	ddress)			
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COVER LETTER

TO: Amendment Section **Division of Corporations**

Gasparilla Music Foundation, Inc	
N1000007601	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for fili	ing.
Please return all correspondence concerning this matter to the following	owing:
David Cox	
(Name of C	ontact Person)
Gasparilla Music Foundation	
(Firm/ C	Company)
PO Box 172986	
(Ad	dress)
Tampa, FL 33672	
(City/ State	and Zip Code)
dcox@gasparillamusic.cm	
E-mail address: (to be used for future an	nnual report notification)
For further information concerning this matter, please call:	
David Cox	813 787-6757
(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 □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified (Addition enclosed)	Copy Certificate of Status al copy is Certified Copy

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

Gasparilla Music Foundation, Inc	
(Name of Corporation as cu	irrently filed with the Florida Dept. of State)
N10000007601	
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:
	The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent:	
Name of New Registered Agent.	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a	ered Agent: um familiar with and accept the obligations of the position
	Signature of New Registered Agent, if changing 2 2
	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.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>\$V</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Carter Henderson	3022 W. Helen Ave
Add			Tampa, FL 33611
x Remove			
2) X Change	P	John Wakefield	509 W Bay St
Add			Apt 204
Remove			Tampa, FL 33606
3) X Change	V	Julio Esquivel	817 Woodlyn Dr
Add			Tampa, FL 33609
Remove			
4) X Change	s	Charles Moore	3422 W Barcelona St
Add			Tampa, FL 33629
Remove			
5) Change	<u>T</u>	Paul Dolcimascolo	4316 W Tacon St
X Add			Tampa, FL 33629
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
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		5/2/2017	
	e date of each amendment		, if other than the
date	e this document was signed.		
, D.ee		5/2/2017	
LH	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
		s block does not meet the applicable statutory filing requirence Department of State's records.	nents, this date will not be listed as the
Ada	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/we was/were sufficient for ap	re adopted by the members and the number of votes cast for oroval.	the amendment(s)
	There are no members or adopted by the board of d	nembers entitled to vote on the amendment(s). The amendmenters.	ent(s) was/were
	Dated	79-2017	
	Signature	hairman or vice chairman of the board, president or other of	Micer_if directors
	, ,	t been selected, by an incorporator – if in the hands of a recourt appointed fiduciary by that fiduciary)	
	D'inter c	John D. Waketie'd	
		(Typed or printed name of person signing	3)
		President - Board	
		(Title of person signing)	