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COVER LETTER

FO: Amendment Section Division of Corporations
NAME OF CORPORATION: VOCAL AVES NOTWORK TALL
DOCUMENT NUMBER: N11000002434
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Marcus Rhodres
(Name of Contact Person) Vocal Arts Network, Juc. (Firm/ Company)
2525 SOUTH MONROR
(Address) (Address) (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mwws Aholes at 850 443 - 5835 (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 \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$52.50 Filing Fee \\ Certificate of Status \\ (Additional copy is enclosed) \\ (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

to

Articles of Incorporation of

Articles of Amendment

FILED
12 DET -8 PM |: 1

Name of Corporation as currently filed with the Florida Dept. of State)

N110000002434

(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:

			The n
ame must be distinguishable and contain t Company" or "Co." may not be used in t		porated" or the abbreviation "Corp." or	· "Inc
B. Enter new principal office address, if Principal office address <u>MUST BE A STE</u>			
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF			
If amending the registered agent and/ new registered agent and/or the new to the ne		lorida, enter the name of the	
		lorida, enter the name of the	
new registered agent and/or the new in Name of New Registered Agent:	registered office address:	lress)	
new registered agent and/or the new in Name of New Registered Agent:	registered office address:		
new registered agent and/or the new in Name of New Registered Agent:	registered office address: (Florida street add	<i>Iress)</i> , Florida	
new registered agent and/or the new in Name of New Registered Agent:	registered office address: (Florida street add (City) anging Registered Agent:	lress) , Florida (Zip Code)	

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	PT	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1)Change Add Remove	D	Stephen Khalfarn	MONROE THUAHASSEL
2) Change Add Remove	<u></u>	•	2525 South Menuse Tatlahassee, FL 32301
Change Add Remove	D	fortia Hills	Javahacree JEL 3280
4) Change Add Remove			
5) Change Add 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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Γhe	date of each amendment(s) adoption: 9////	
Effe	ctive date if applicable: 9 1/1 2	
	(no more than 90 days after amendment file date)	
Ado	ption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated /0/8/13	
	Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Marcus Rhodes	
•	(Typed or printed name of person signing) Resident (Title of person signing)	