N17000000755

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TO: Amendment Section
Division of Corporations

BRIDGES OF HARM NAME OF CORPORATION:	ONY CHORUS, INC	• —		-
N17000000755				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are subm	itted for filing.			
Please return all correspondence concerning this matter	to the following:			
Susan Illingworth, Finance Coordinator				
(Name of Contact Person	οπ)		•
Bridges of Harmony Chorus, Inc.				
	(Firm/ Company)			•
P. O. Box 2302				
	(Address)			-
Jacksonville, FL 32203-2302				
(City/ State and Zip Co	de)		-
SwabbieSue@aol.com				
E-mail address: (to be used	for future annual repor	t notification)	-
For further information concerning this matter, please of	call:			
Susan Illingworth		04	534-3581	
(Name of Contact Person)	a:a:	Area Code)	(Daytime Telephone Number)	-
Enclosed is a check for the following amount made pay	yable to the Florida De	partment of	State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy is sed)	
Mailing Address Amendment Section		et Address ndment Secti	on	:

Amendment Section Division of Corporations P.O. Box 6327 Taltahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

36.16 11 3:17

Articles of Amendment to Articles of Incorporation of

BRIDGES OF HARMONY CHORUS, INC.

Name of Corporation as currently filed with the Florida D	Dept. of State)	
N17000000755		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following	
A. If amending name, enter the new name of the corporati	ion:	
NA	The new	
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable:	423 Rondel Cove	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Orange Park, FL 32065-5604	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P. O. Box 2302	
	Jacksonville, FL 32203-2302	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		
Name of New Registered Agent: N	<u> </u>	
New Registered Office Address:	(Florida street address)	
New Registered Office Address.		
-10-01	, Florida	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: miliar with and accept the obligations of the position.	
	ignature of New Registered Agent, if changing	

(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>M</u>	nn Doe ke Jones Hy Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
• 1) Change Add	P	SUSAN ME	VIO	JACKSONVILLE, FL 32248
X Remove 2) Change Add	Р	SHELLY TI	RAFICANTE	31 FOXCROFT RUN ORMOND BEACH, FL 32174
Remove 3) Change Add X Remove	V	JANET SOE	BOLEWSKI	5358 WINROSE FALLS DR. JACKSONVILLE, FL 32258
-4) ChangeX Add		JANET BOI	ECKMAN	3746 CROSSVIEW DR. JACKSONVILLE, FL 32224
Remove 5) Change Add	T	CARLA CH	ADWICK	3546 LAWRENCE RD ORANGE PARK, FL 32073
X Remove 6) Change X Add	T	SUSAN ILL	INGWORTH	1924 BROWARD RD JACKSONVILLE, FL 32218
E. If amending or	adding additional			
NO CHANGES TO	O ARTICLES			
ADD:	S ALLISO	N SLIPSKY	8256 MEADOW WALK	LANE, JACKSONVILLE FL 32256
ADD:	D MARY	PAT WILSON	3761 BERENSTAIN DR	L. ST AUGUSTINE, FL 32092
ADD	D KATHY	MCGILL 1	2 NORTH CRESCENT	BEAUFORT, SC 29906
REMOVE	D JENNIFE	R ATCHISON 1	7271 EAGLES PERCH I	DR., JACKSONVILLE, FL 32244

■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

	10/04/2023
Dated _	
Signature	* Susan A Illingworth
. (I	By the chairman or vice chairman of the board, president or other officer-if directors
	have not been selected, by an incorporator \(^{\mu}\) if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
'	oner count appointed inductary by that inductary)
	SUSAN A. ILLINGWORTH
	(Typed or printed name of person signing)

(Title of person signing)