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of 2/28/2022

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATI		NATIONAL PHILAR	RMONI	CINC	
DOCUMENT NUMBER:	N18000002942				
The enclosed Articles of Art					
Please return all correspond	ence concerning this ma	tter to the following:			
CARLOS ARAGON	-	٠			
		(Name of Contact P	Person)		
		(Firm' Compan	y)		
9310 FONTAINEBLEAU I	304 BOULEVARD # 304				
		(Address)		<del></del>	
MIAMI, FL 33172					
	· · · · · · · · · · · · · · · · · · ·	(City/ State and Zip	Code)		
caragon@bolivarphil.com					
F	-mail address: (to be use	ed for future annual re	port not	ification	1)
For further information cond	erning this matter, pleas	e call:			
CARLOS ARAGON		at			
	(Name of Contact Perso	n)	(Area	Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made p	payable to the Florida	Departi	nent of l	State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	ddress	<u>St</u>	reet Ad	dress	

Amendment Section Amendm Division of Corporations Division

P.O. Box 6327

Tallahassee, Fl. 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

FLORIDA INTERNATIONAL PHILARMONIC INC

2022 FEB 22 AM 8: 41

(Name of Corporation as currently filed with the	c Florida D	Dept. of State)	
			SECRETARY OF STATE TALLAHASSEE, FL
(Docum	nent Numbe	er of Corporation (if known)	14 14 14 14 14 14 14 14 14 14 14 14 14 1
Pursuant to the provisions of section 617.1006. Flo amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not For Profit Co</i>	prporation adopts the following
A. If amending name, enter the new name of the	e corporati	on:	
name must be distinguishable and contain the word	l "corporat	ion" or "incorporated" or the al	The new
"Company" or "Co." may not be used in the name	<u>e</u> .	9310 FONTAINEBLEAU BOU	•
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>		MIAMI, FL 33172	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	9310 FONTAINEBLEAU BOU	ILEVARD # 304
, , , , , , , , , , , , , , , , , , , ,		MIAMI, FL 33172	
D. If amending the registered agent and/or regi- new registered agent and/or the new register			name of the
		ARAGON	
	9310 FONTAINEBLEAU BOULEVARD # 304		
New Registered Office Address:		(Florida street ac	ldress)
	MIAMI, F		Florida
N. N. J. J. A. S. J. J. S. J. J. S. J. J. S. J.		(City)	(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	t. Lam fan	<b>Agent:</b> viliar with and accept the obligat	ions of the position.
_		gnature of New Registered Agent.	, q = h
	Sig	ynature of New Registered Agent,	ifthanging

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.

stike Jones, v as Keme	ove, and Sauy Sr	ntth, SV as an Add.	
Example: XChange X Remove X Add	$\underline{V}$ Mi	un Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) × Change Add Remove	Р	<u>CARLOS ARRAGON</u>	9310 FONTAINEBLEAU BLVD MIAMI, FL 33172
2) × Change Add Remove	<u>v</u>	EVA MORENO	21100 SW 87TH AVE CUTLER BAY, FL 33189
3 ) Change Add Remove	<u>C</u>	DAVID PEREZ	2630 NW 84TH AVE APT 101 MIAMI, FL 33122
4) Change Add		<del></del>	
Remove 5) Change Add Remove			
6) Change Add			
Remove E. <u>If amending or add</u> (attach additional sh	ling additional a	Articles, enter change(s) here: c). (Be specific)	

, <b>,</b>		
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The date of each amendment(s) adoption:		_, if other than the
date this document was signed.		
Efficient and a second state of		
Effective date if applicable:	o more than 90 days after amendment file date)	<u> </u>
m	o more man 90 days after amenament file date)	
<u>Note:</u> If the date inserted in this block does a document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not of State's records.	be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	

Signature

(By the chairman or vice chairman of the board, posident 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)

(Typed or privted name of person signing)

(Title of person signing)

PRESIDENT

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were