## N18000009979

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	MUSIC ANGELS E	EDUCATION FUI	ND, INC	·.	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER:	N18000009979				
					s=w
The enclosed Articles of Art	nendment and fee are sub	mitted for filing.			
Please return all correspond	lence concerning this matt	er to the following	:		
LINDA SPOSATO					
		(Name of Contact	Person)	)	
MUSIC ANGELS EDUCA	ATION FUND, INC.				
	, ,	(Firm/ Comp	any)		
540 REEF ROAD					
		(Address)	)		·······
VERO BEACH, FL 3296	3				
		(City/ State and Z	ip Code	)	
lindasposato@gmail.com	1				
	-mail address: (to be used	d for future annual	report n	otification	i)
For further information con	cerning this matter, please	e call:			
Linda Sposato			484		885-7492
	(Name of Contact Person	n)		a Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Floric	ia Depar	tment of	State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing For Certified Copy (Additional copenclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

**Mailing Address** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

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

<b>MUSIC ANGELS</b>	EDUCATION FUND,	INC.

Name of Corporation as currently filed with the	e Florida D	ept. of State)		
N 18000009979				
(Docum	ment Numbe	er of Corporation (if know	m)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statute	s, this <i>Florida Not For P</i>	rofit Corporation adopts the	following
A. If amending name, enter the new name of th	e corporati	on:		
				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorporated" o	r the abbreviation "Corp." o	r "Inc."
B. Enter new principal office address, if applica	able:			<u> </u>
(Principal office address <u>MUST BE A STREET A</u>	<u>4DDRESS</u> )	540 REEF ROAD		
		VERO BEACH, FL 329	63	2020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		540 REEF ROAD, P.C	). BOX 650489	2020 JUH 1
		VERO NBEACH , FL 3	2965	
D. If amending the registered agent and/or reginer registered agent and/or the new register			ter the name of the	•
	LINDA SI			
Name of New Registered Agent:	540 REE	F ROAD		
New Registered Office Address:	<del></del>	(Florid	u street address)	
	VERO BE	EACH	32963 , Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			obligations of the position.	
-	X	inda De	4917	
	Sig	Inature of New Refistered	Agent of changing	

AND ROUTEST OF CACH CHINCH REDUCT DIRECTOR DEING REGICE.

(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 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: XChange X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change Add	D	Anush Avetisyan	817 Chapel Rd New Haven, CT 06510
Z Remove  Change Add	D_	Lauses KIETNAN JONES	3745 8th Place
Remove 3) Change Add Remove			3296
4) Change Add	<del></del>	<u></u>	
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or add (attach additional sho		ticles, enter change(s) here: (Be specific)	•
The designation FOUNDAT	FION was incorrect - I	it is not a FOUNDATION	
Please replace the word FO	UNDATION with PUE	BLIC CHARITY wherever it appears in the Articles of Ir	scorporation.

•		
<u> </u>		
	<u> </u>	
The date of each amendment(s) adoption:		if other than the
date this document was signed.		. II outer man me
Effective date if applicable:		
	10 more than 90 days after amendment file date)	
	not meet the applicable statutory filing requirements, this date will not be	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
<b></b>		
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

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 ————————————————————————————————————					
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)					
LINDA SPOSATO					
(Typed or printed name of person signing)					
PRESIDENT					
(Title of person signing)					