## N21 000 008 326

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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: North Palm Youth Symphony, Inc
DOCUMENT NUMBER: N21000008326
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Heather Fernandez (Name of Contact Person)
North Palm Youth Symphony (Firm/Company)
4260 Applecrest Dr.
Palm Beach Gardens, FL 33410 (City/ State and Zip Code)
northpalmyouthsymphony@gmail.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Heather Fernande2 at (501) 389-5003  (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:    S35 Filing Fee

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 FILED

	of			
North Palm Youth	Symphony	, Inc	2022 NOV -2	AM 7: 13
(Name of Corporation as currently filed with the	e Florida Dept. of S	tate)		
N21000008	326		SEURE TALL 1 44 c	EF STATE
		poration (if known		<u> </u>
Pursuant to the provisions of section 617.1006. Floamendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Fl</i>	orida Not For Pro	fit Corporation adopts th	ne following
A. If amending name, enter the new name of the	e corporation:			
NIX				The new
name must be distinguishable and contain the word	l "corporation" or "	'incorporated" or	the abbreviation "Corp.	
"Company" or "Co." may not be used in the name	<u>e</u> .			
B. Enter new principal office address, if applica		<u> </u>		
	-	<del></del>		_
C. Enter new mailing address, if applicable:	Ala NIA			
(Maning address MAT BE A POST OFFICE	BOX) 131			
				_
			<u> </u>	
		ss in Florida, ente	r the name of the	
	.\			
Name of New Registered Agent:	NIW —		<del></del> _	
No. 2 Provide and CVT and Library		(Florida s	treet address)	
<u>New Registerea Office Adartess</u> :	North Palm Youth Symphony, Inc.  SECRETAL CF STATE  N 2 1 000008 3 2 4  (Document Number of Corporation (if known)  and to the provisions of section 617.1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following dment(s) to its Articles of Incorporation:  Six The new must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." apany" or "Co." may not be used in the name.  Inter new principal office address, if applicable:  Cipal office address MUST BE A STREET ADDRESS)			
	PIR			
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I	Registered Agent:			
I hereby accept the appointment as registered agen	t. Lam familiar wit	h and accept the o	bligations of the position	٠.
<u>-</u>				
	Signature o	of New Registered 2	Agent, if changing	

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

	•		
Example:  X Change X Remove X Add	PT         John D           V         Mike Jo           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
i) Change Add	<u>P</u>	Kaitlin J Springer	3141 Drew St. Clearwater, FL 33759
Remove 2) Change Add	I	Kevin Seto	
Remove 3) Add Remove	S,T	Heather Fernander	Palm Beach Gardens, FL 33410
4) Change Add	_D_	Susan Bickel	512 Oyster Rd North Falm Beach, FL 33408
Remove  5) Change Add	D	Trevor Drushal	716 Eastwind Dr. North Palm Brach, Fl. 33408
Remove 6) Change Add			
E. If amending or adding (attach additional sheet)		icles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adoption:  date this document was signed.  Effective date if applicable:  8 31 2022  , if other to the signed of	han tha
The date of each amendment(s) adoption:  O D D D D D D D D D D D D D D D D D D	nan uic
Effective date if applicable: 8 31 2022	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.	the
Adoption 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.	

	nbers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.
Dated	
Signatur	c H
·	(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)
	Heather Fernandez
	(Typed or printed name of person signing)
	Registered Agent, Secretary, Treasu (Tille of person signing)