N22000010884

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COVER LETTER

TO: Amendment Section Division of Corporations

Sunshine H NAME OF CORPORATION:	larmony Chorus Inc				
N22000010884					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fe	e are submitted for	filing.			
Please return all correspondence concerning	this matter to the fo	llowing:			
Kathy McDaniel					
	(Name of	Contact Person)			
Sunshine Harmony Chorus Inc					
1100	(Firm	/ Company)			
5717 Henry Loop					
	(/	Address)			
The Villages, Florida 32163					
	(City/ Stat	e and Zip Code)			
medan74@gmail.com					
E-mail address: (1	o be used for future	annual report no	otification)	
For further information concerning this matt	er, please call:				
Kathy McDaniel		502 at		744-3211	
(Name of Conta	et Person)		ı Code)	(Daytime Telepho	one Number)
Enclosed is a check for the following amoun	t made payable to th	ne Florida Depar	lment of S	State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate o	f Status Certifie	d Copy onal copy is	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address		Street A	ddre <u>ss</u>		

Amendment Section Division of Corporations 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

Arucic	of	
Sunshine Harmony Chorus Inc	OI.	
Name of Corporation as currently filed with the Florida	Dept. of State)	2000
N22000010884		201 -7 (1)
(Document Numb	per of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	tion:	
N/A		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ition" or "incorporate	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	.4//	
D. If amending the registered agent and/or registered offines registered agent and/or the new registered office agent.		, enter the name of the
N/A		
<u>Name of New Registered Agent:</u> N/A		
	(F	orida street address)
New Registered Office Address:		
N/A		, Florida N/A
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa		the obligations of the position.
	ignature of New Regist	ered 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 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.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>V</u>	Scott, Peggv	2369 Little Mountain Loop The Villages, Florida 32162
× Remove 2) Change Add	<u>v</u>	Scott, Margaret Anne	2369 Little Mountain Loop The Villages, Florida 32162
Remove 3) Remove Add Remove		·	
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or adding (attach additional sheet)		icles, enter change(s) here: (Be specific)	

	<u> </u>	
		
	the state of the s	
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	May 1, 2024	
The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
Effective date if applicable: May 1, 2024		
Effective date it applicable.	o more than 90 days after amendment file date)	
!"	no more mun 30 days after amenament file unter	
<u>Note:</u> If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be t of State's records.	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted b was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

Dated	May 1, 2024
Signaturo	Kordy Backeniel
-	(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)
	Kathy McDaniel
	(Typed or printed name of person signing)
	Treasurer

.