(1	Requestor's Name)	
(	Address)	
(	Address)	
(	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(	Business Entity Name)	
	Document Number)	
Certified Copies	Certificates of	Status
,		
Special Instructions	to Filing Officer;	



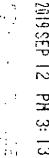


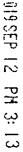
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Venetian Har NAME OF CORPORATION:	mony Chapter of Sweet /	Adelines Internat	ional, Inc.	
N28894				
DOCUMENT NUMBER:				<del></del>
The enclosed Articles of Amendment and fee	are submitted for filing.			
Please return all correspondence concerning the	nis matter to the following	<u>:</u>		
Mary Anne Freedman				
	(Name of Contac	t Person)		
Venetian Harmony				
	(Firm/ Comp	pany)		
4870 Via San Tomaso				
	(Address	5)		
Venice, FL 34293				
	(City/ State and 2	Zip Code)		
mafreedman1@gmail.com				li
E-mail address: (to	be used for future annua	report notification	on)	
For further information concerning this matter	, please call:			
Mary Anne Freedman		941 at	320-7196	
(Name of Contac	t Person)	(Area Code)	(Daytime Telephone	e Number)
Enclosed is a check for the following amount	made payable to the Flori	ida Department o	f State:	
\$35 Filing Fee  \$43.75 Filing Certificate of	S Fee & \$\sumsymbol{\Pi}\$\$\$\$ \$\footnote{\Pi}\$\$ \$43.75 Filing \$\$ Certified Copy \$\$ (Additional coenclosed)	Cert opy is Cert (Ad	.50 Filing Fee ificate of Status ified Copy ditional Copy is closed)	
Mailing Address		Street Address		
Amendment Section		Amendment Sec		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Venetian Harmony Chapter of Sweet Adelines Internationa			
(Name of Corporation as curr	ently filed with the Flo	rida Dept. of State)	
N28894			
(Document Nur	nber of Corporation (if I	(nown)	
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not F</i>	or Profit Corporation adopts the following	
. If amending name, enter the new name of the corpor	ration:		
/enetian Harmony Chorus, Inc.		► The new	
name must be distinguishable and contain the word "corpo" Company" or "Co." may not be used in the name.	ration" or "incorporate		
3. Enter new principal office address, if applicable:		.: 20	
Principal office address <u>MUST BE A STREET ADDRES</u>	<u>(S</u> )	198	
			· ~=
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u>-</u> <u>×</u>	
maning address military bearings. O. 1100 Borry		<u>ښ</u>	-
		•	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered offic  Name of New Registered Agent:	e address:	, enter the name of the	
		Florida street address)	
New Registered Office Address:	.,	10/ruu Sireer uuuressy	
		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am		of the obligations of the position.	
	Signature of New Revi	stered 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	<u>V</u> <u>Mik</u>	n <u>Doe</u> le <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	т	Christa Rivette	303 Kensington Street
X Add			Port Charlotte, FL 33954
Remove			
2) Change	S	Lois Greene	596 Box Elder Court
X Add			Englewood, FL 34223
Remove			
3 ) Change	D	Marie Getchell	6851 Ocean Court
X Add			North Port, FL 34287
Remove			
4) Change	D	Dale Douros	7381 Bass Street
Add	<del></del>		Englewood, FL 34224
X Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	

		Name Change: 08/19/19; New Officers: 05/02/19	
	this document was	ndment(s) adoption:signed.	, if other than the
Effe	ective date <u>if appli</u>		<del>,</del>
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not ate on the Department of State's records.	be listed as the
Adoption of Amendment(s)		ent(s) (CHECK ONE)	,
	The amendment(s was/were sufficier	) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	September 1, 2019	
	Signature	Muy long Treed non	
		(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)	
		Mary Anne Freedman	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	