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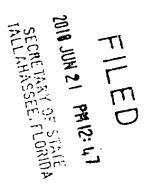
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nam	ne)
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Certified Copies	_ Certificates	of Status
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Amend/Mamachs

JUN 2 2 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION	Goldcoast Chapter o	of Sweet Adelines In	nternational	Corporation	
DOCUMENT NUMBER: _	N93000005531				
The enclosed Articles of Am	endment and fee are subm	itted for filing.			
Please return all corresponde	nce concerning this matter	to the following:			
V. Moran					
	(Name of Contact Per	son)		
		(Firm/ Company)			
1238 Medinah Drive					
		(Address)			
Fort Myers, FL 33919					
	(City/ State and Zip C	ode)		
vmoran@outlook.com					
Е	-mail address: (to be used	for future animal repo	rt notification)	
For further information conc	erning this matter, please c	all:			
V. Moran		at	786	299-5170	
	(Name of Contact Person)		Area Code)	(Daytime Telephone Number)	_
Enclosed is a check for the f	ollowing amount made pay	able to the Florida De	epartment of	State:	
■ \$ 35 Filing Fee	□\$43.75 Filing Fee & E Certificate of Status		Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

(Name of Corporation as cur	rrently filed with the Fl	orida Dept. of State)
N93000005531		
(Document N	umber of Corporation (if	known)
Pursuant to the provisions of section 617,1006. Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not I</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
Goldcoast Chorus, Sweet Adelines International Cor	p.	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	ooration" or "incorporat	
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		SECULATION OF THE PARTY OF THE
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		a, enter the name of the
Name of New Registered Agent:		ORIZ.
New Registered Office Address:	- 1	(Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I a		pt the obligations of the position.
	Signature of New Reg	istered 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>	<u>i Doe</u> <u>e Jones</u> <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Tammy Themmen	1637 Micanopy Avenue
Add			Miami, FL 33133
XRemove			
2) X Change	PD	Oreali Almeida	12147 SW 50 Place
Add	 _		Cooper City, FL 33330
Remove			
3) Change	TD	V. Moran	1238 Medinah Drive
🗶 Add			Fort Myers, FL 33919
Remove			
4) Change	SD	Muffy Warren	7760 SW 163rd Place
X Add			Kendall Lakes, FL 33193
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articular Arti	(Be specific)					
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5/22/2018	
The date of each amendment(s) adoption:late this document was signed.	, if other than the
Effective date if applicable:	
(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 datecument's effective date on the Department of State's records.	ite will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendm was/were sufficient for approval.	ent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/w adopted by the board of directors.	ere
6/1/2018 Dated	
Signature Ceresti Odmi de	<u></u>
(By the chairman or vice chairman of the board, president or other officer-if direction have not been selected, by an incorporator – if in the hands of a receiver, trustee other court appointed fiduciary by that fiduciary)	etors , or
Oreali Almeida	
(Typed or printed name of person signing)	
President/Director	
(Title of person signing)	