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DIVISION OF CORPORATE

Amend 15/12

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Sunny Isles Beach Orchestra Incorporoted DOCUMENT NUMBER: P11000078499 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Gregory Korchmar** Name of Contact Person Sunny Isles Beach Orchestra Incorporated Firm/ Company 294 Atlantic Ave Address Sunny Isles Beach FL 33160 City/ State and Zip Code gkorr12@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Gregory Korchmar** Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

Amendment Section Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation



Sunny Isles Beach Orchestra Incorporated

(Name of Corporation as currently filed with the Florida Dept. of State)

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lment(s) to

•	nt Number of Corporation	(if known)	
ursuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation adopts the followi	
. If amending name, enter the new na	ame of the corporation:		
	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the a "Co". A professional corporation name must	
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		294 Atlantic Ave	
		Sunny Isles Beach FL 33160	
Enter new mailing address, if appli (Mailing address MAY BE A POST		294 Atlantic Ave	
If amending the registered agent an	ıd/or registered office ad	Sunny Isles Beach FL 33160 dress in Florida, enter the name of the	
If amending the registered agent an new registered agent and/or the nev	.d/or registered office ad w registered office addre	dress in Florida, enter the name of the	
If amending the registered agent an	ıd/or registered office ad	dress in Florida, enter the name of the ss:	
If amending the registered agent an new registered agent and/or the new	id/or registered office ad w registered office addre Gregory Korchi 294 Atlantic Av	dress in Florida, enter the name of the ss:	
If amending the registered agent an new registered agent and/or the new	id/or registered office ad w registered office addre Gregory Korchi 294 Atlantic Av	dress in Florida, enter the name of the ess: mar /e street address)	

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
!) Change Add Remove	PRES	MUCHNIK, EUGENE	210 174TH STREET APT 1009 SUNNY ISLES BEACH FL 33160
2) Change Add Remove	VP	MUCHNIK, ZOYA	210 174TH STREET APT 1009 SUNNY ISLES BEACH FL 33160
Change X Add Remove	PRES	KORCHMAR, GREGORY	294 ATLANTIC AVE SUNNY ISLES BEACH FL 33160
4) Change Add Remove	<u></u> .		
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	ı

The date of each amendment(s) ad	loption: 6/27/20/2
Effective date <u>if applicable:</u>	6/27/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was were sufficient for approval
by Myory	for the amendment(s) was were sufficient for approval (voting group) ""
action was not required.	opted by the board of directors without shareholderaction and shareholder opted by the incorporators without shareholder action and shareholder
•	127/12 sejong harhme
(By a di selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court red fiduciary by that fiduciary)
арроли	(Typed or printed name of person signing)
	,
•	Presi den t (Title of person signing)