P14000087095

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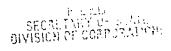
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Tampa Bay Harp	Ensemble Inc.	
DOCUMENT NUM	BER: P14000087095		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Leigh Fletcher		
	THE CONTRACT OF THE CONTRACT O	Name of Contact Person	n
	Fletcher & Fischer, P.L.		
		Firm/ Company	
	501 East Kennedy Blvd. Ste.	802	
		Address	
	Tampa, FL 33602		
		City/ State and Zip Cod	e
awith	nrow@fletcherfischer.com		
		sed for future annual report	notification)
	2 (** ** ** **	, , , , , , , , , , , , , , , , , , ,	
For further informatio	n concerning this matter, pleas	se call:	
Angel Withrow		at (813	898-2828
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number
			•
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



Tampa Bay Harp Ensemble Inc.

15 APR 24 PM 12: 08

	f Corporation as curren	tly filed with the Florida Dept. of State)	
P14000087095	(Dogument Number	of Comparation (if Impure)	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	me of the corporation:		
	ation "Corp," "Inc," or	The new fon," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
B. Enter new principal office address,	f annlicable:	7901 3rd Street, North	
(Principal office address MUST BE A ST	TREET ADDRESS)	St. Petersburg, FL 33702-4407	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7901 3rd Street, North	
		St. Petersburg, FL 33702-4407	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office ad	dress in Florida, enter the name of the	
	Leigh Fletcher	<u></u>	
Name of New Registered Agent	501 East Kennedy Blvd.	Sta 902	
		treet address)	
	Tampa	33602	
New Registered Office Address:	rampa	, Florida	
		(City) (Zip Code)	
New Registered Agent's Signature, if ch	nanging Registered Ager	ıt;	
		with and accept the obligations of the position.	
. 0			
\mathcal{J}_{α}	M Z	/ laha	
<u> </u>	Signature of Man	Registered 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	<u>PT</u>	John Do	<u>be</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
I) Change	F, D		Anthony Hamilton	18451 Red Willow Way
Add XX Remove				Land O Lakes, FL 34638
2) Change		_		
Add Remove				
3) Change		_		
Add				
Remove				
4) Change		to the		
Add				
Remove				
5) Change		-		
Add Remove				
6) Change		_		
Add				
Remove				

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

	4/21/2015	
The date of each amendment(s) date this document was signed.		; if other than t SECRETARY UP 1 2/4 DIVISION OF CORPOZATOR
Effective date if applicable:	21/2015	
	(no more than 90 days after amendment file date)	15 APR 24 PM 12: 08
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amend sufficient for approval.	iment(s)
	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment(
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
■ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareho	lder
4/23/201	5	
Dated		
~	Janua Titatio	
Signature	xelen xuine	A b
	director, prefident or other officer – if directors or officers have no ted, by an incorporator – if in the hands of a receiver, trustee, or oth	
	inted fiduciary by that fiduciary)	ci couit
	Leigh Fletcher	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	-