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## COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The enclosed Articles of Amendment and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  Shenise Surinach  (Name of Contact Person)	
Please return all correspondence concerning this matter to the following:  Shenise Surinach  (Name of Contact Person)	
Shenise Surinach (Name of Contact Person)	
(Name of Contact Person)	
The Harmony Inspiration	
(Firm/ Company)	
606 Green Springs Place	
(Address)	<del></del>
West Palm Beach, FL 33409	2
(City/ State and Zip Code)	
originalharmony@hotmail.com	2007 13
E-mail address; (to be used for future annual report notification)	
For further information concerning this matter, please call:	P
Shenise Surinach 561 674-8051	Pii I. I
(Name of Contact Person) (Area Code) (Daytime Telephone Number	r) CD
Enclosed is a check for the following amount made payable to the Florida Department of State:	
■ \$35 Filing Fee □S43.75 Filing Fee & □S43.75 Filing Fee & □S52.50 Filing Fee Certificate of Status  Certificate of Status (Additional copy is enclosed)  □S52.50 Filing Fee Certificate of Status (Additional copy is Enclosed)	
Mailing Address Amendment Section Division of Corporations  Street Address Amendment Section Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

Harmony Talent Management and Events Inc.

(Name of Corporation as currently filed with the Florida I	Dept. of State)	
F12000091140		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corpore	ntion adopts the following
A. If amending name, enter the new name of the corporat	ion:	
The Harmony Inspiration Inc.		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbrevi	ation "Corp." or "Inc." 202
B. Enter new principal office address, if applicable:		<u></u>
(Principal office address MUST BE A STREET ADDRESS	)	· 🖺
		<del></del>
C. Enter new mailing address, if applicable:		<u></u>
(Mailing address MAY BE A POST OFFICE BOX)		Post of the contract of the co
D. If amending the registered agent and/or registered offi- new registered agent and/or the new registered office a		of the
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:		
		lorida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: niliar with and accept the obligations o	of the position.
<del></del>	A. V. D. day of the second second	
51	gnature of New Registered Agent, if ch	unging

......

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 James 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 V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add			
Remove			
4) Change Add			
Remove  5) Change Add			
Remove 6) Change			
Add			
E. If amending or addin (attach additional shee	g additie ts. if nece	onal Articles, enter change(s) here: ssary: (Be specific)	
	-		
	_		***************************************

		<del></del>
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		<del></del>
The date of each amendment(s) addate this document was signed.	option:	if other than the
Effective date if applicable:		
	(no more than 90) days atter amendment tile date)	
<u>Note:</u> If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adwas/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s)	

	mbers or members entitled to vote on the amendment(s). The amendment(s) was/were
idopted by the b	oard of directors.
Dated	9/28/2022
Signatu	(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)
	Shenise Surmach
	(Typed or printed name of person signing)
	President
	(Title of person signing)