# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

above, or on an allaciment with an other line empowered.		
SIGNATURE: LAURA WILCOX	DIRECTOR	04/22/2022

DOCUMENT# N1400008771

Entity Name: MIAMI YOUTH FOR CHAMBER MUSIC, INC.

### **Current Principal Place of Business:**

12724 SW 204TH ST NONE MIAMI, FL 33177

#### Current Mailing Address:

12724 SW 204TH ST NONE MIAMI, FL 33177 US

#### FEI Number: 47-1852712

## Name and Address of Current Registered Agent:

WILCOX, LAURA J MS. 12724 SW 204TH ST NONE MIAMI, FL 33177 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	LAURA WILCOX			04/22/2022		
	Electronic Signature of Registered Agent			Date		
Officer/Director Detail :						
Title	P	Title	VP			
Name	WILCOX, LAURA	Name	POWELL, BRIAN			
Address	12724 SW 204TH ST	Address	6645 SW 55TH LANE			
City-State-Zip:	MIAMI FL 33177	City-State-Zip:	MIAMI FL 33155			
Title	OFF	Title	OFF			
Name	MYRTHIL, RENEE	Name	SARMIENTO-MOLINA, PATRIC	AIA		
Address	5540 SW 156TH PL	Address	1565 MALAGA AVE.			
City-State-Zip:	MIAMI FL 33185	City-State-Zip:	CORAL GABLES FL 33134			
Title	OFF	Title	OFFICER			
Name	FALKENSTEIN, GREGORY	Name	FRITH, KEISHA			
Address	PO BOX 70414	Address	ADRIENNE ARSHT CENTER,			
City-State-Zip:	FT. LAUDERDALE FL 33307		EDUCATION 1300 BISCAYNE BLVD.			
		City-State-Zip:	MIAMI FL 33132			

Electronic Signature of Signing Officer/Director Detail

#### FILED Apr 22, 2022 Secretary of State 9308387622CC

Certificate of Status Desired: Yes

Date