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AUG 1 3 2013



## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ctionist Synagogue, Inc	<b>.</b>	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this r	matter to the following:		
Karen B. Cameron			
	(Name of Contact Pe	erson)	
The Reconstructionist Synagogue, Inc.			
	(Firm/ Company	/)	
11301 West Broward Blvd.			
	(Address)		
Plantation, FL 33325			
	(City/ State and Zip	Code)	
Karen@Ramatshalom.org			
E-mail address: (to be	used for future annual rep	ort notification	n)
For further information concerning this matter, pl	ease call:		
Karen Cameron	at	954	472-3600
(Name of Contact Pe			(Daytime Telephone Number)
Enclosed is a check for the following amount mad	de payable to the Florida I	Department of :	State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	Certified Copy (Additional copy i enclosed)	Certif s 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	Ar Di Cl	rect Address nendment Sectivision of Corpo ifton Building 61 Executive C	prations

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

The Reconstructionist Synagogue, Inc.

The Reconstructionist Synagogue, inc.			
(Name of Corporation as) CC4480767660	currently filed with the Florid	1a Dept. of State)	
	t Number of Corporation (if kno		
Pursuant to the provisions of section 617.1006, Florida imendment(s) to its Articles of Incorporation:	•		e following
A. If amending name, enter the new name of the co	rporation:		
			The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorporated"	or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.			
(Mailing address MALBE A POST OFFICE BO.	<u></u>		
	<del></del>		
D. If amending the registered agent and/or register new registered agent and/or the new registered		nter the name of the	
Name of New Registered Agent:			
	(Flo.	rida street address)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Reg	istered Agent:		
I hereby accept the appointment as registered agent.		he obligations of the position.	2
	Signature of New Registe	red Agent, if changing	1 6- 91 V
	Page 1 of 4	CORIE ESTATI	D W C

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	$\overline{\underline{\mathbf{V}}}$	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Financial Secretary-Brian Kopelov	200 SW 1 Avenue Suite 1200
Add			Fort Lauderdale, FL 33304
X Remove			
2) Change	s 	Secretary-Beth-Ann Krimsky	12341 NW 9 Street
X Add			Plantation, FL 33325
Remove 3) X Change	s	Financial Secretary-Robert Pinkie	2641 NE 207 Street
Add			Aventura, FL 33180
Remove			
4) Change	Т	Treasurer-Jason Haber	888 S Andrews Avenue Suite 20
X Add			Fort Lauderdale, FL 33316
Remove			
5) Change	Т	Treasurer-Gary Branse	4021 Crossbil Lane
Add			Weston, FL 33331
X Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Art</u>	icles, enter change(s) here:
E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
	<u> </u>
<del></del>	

The date of each amendment(s) adop	tion:	, if other than the
late this document was signed.		
June 1,	, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block document's effective date on the Depar	does not meet the applicable statutory filing requirements, this date witness of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s	)
There are no members or members adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/were	
Dated July 30, 2018		
Signature	n or vice climirman 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 sointed fiduciary by that fiduciary)	
Carol Katle	કા	
<del>-</del>	(Typed or printed name of person signing)	
President		
	(Title of person signing)	