No4 00000 182

(Re	equestor's Name)			
(Ad	idress)			
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JAN 0 5 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: OHR HA	CHAIM HAK	ADOSH SHEVACH, INC.	
DOCUMENT NUMBER: NO40000	28100	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of Amendment and fee are su	abmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Ronald R. F	Name of Contact Perso	n)	
OHR HA CHA	AIM HA KADO (Firm/ Company)	SH SHEVACH, INC.	
200 south	Biscayne (Address)	Boulevard suite 200	
M'ami, F	City/ State and Zip Cod	le)	
E-mail address: (to be us	stone armai report	stein. Com	
For further information concerning this matter, please	se call:		
Ronald Fieldstone		<u> 428-4500</u>	
(Name of Contact Person)		ode & Daytime Telephone Number)	
Enclosed is a check for the following amount made	-		
\$35 Filing Fee \$343.75 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)	
Mailing Address		Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327		n Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

OHR HACK	1 MIAL	1A KADO	OSH SI	<u>1EVACH,</u>	INC.
(Name of Corporation as currently filed	<u>d with the Flor</u>	rida Dept. of Stat	<u>e</u>)	•	
NC	14000	$\gamma \gamma \gamma 182$	_		
		rporation (if know	m)		
Pursuant to the provisions of section 617.1006, amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of			t For Profit Corp	oration adopts the fo	ollowing
	-			SE.	C FINZS
name must be distinguishable and contain the w "Company" or "Co." may not be used in the ne		•			The T
B. Enter new principal office address, if appl	licable:	<u> 200 : </u>	South B	o'sayne B	bravatuc
(Principal office address MUST BE A STREE	<u>TADDRESS</u>)	Sulte 2	00, C/O	Arstein &	Ech- LLP
			FL 33		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC					
D. If amending the registered agent and/or renew registered agent and/or the new regis			ida, enter the na	me of the	
Name of New Registered Agent:				_	
New Registered Office Address:	(Florida street address	·)	-	
			, Florida	ı	
	(City)			(Zip Code)	
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag			cept the obligation	ns of the position.	

Signature of New 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 X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)	<u>~~</u>	Mordechai Aflalo	2999 NE 191st Sheet PHZ Aventura, FL 33180
2) Change Add	<u> </u>	Melra Aflalo	826 Argonaut 151e Dania Brach, IL 33004
Remove 3) Change Add Remove	Pres	Eddie Nurieli	1835 E. Hallandale Beach Swite 117 Hallandale Beach, FL 3300
4) Change Add Remove		 	
5) Change Add Remove			-
6) Change Add Remove			
		D 1 - C 4	 -

If amending or adding additional Art (altach additional sheets, if necessary).	(Be specific)		
			
		 -	
			<u> </u>
	-		

date this document was signed.	toption:	, if other than tr
Effective date if applicable:		
, 	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were acc was/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) al.	
There are no members or members adopted by the board of directors	pers entitled to vote on the amendment(s). The amendment(s) was/were prs.	
Dated12	2-22-14	
Signature	The state of the s	
	man or vice chairman of the board, president or other officer-if directors	
	en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	Eddie Novieli	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	