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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MIAMI COALITI	ON OF CHRISTIANS AND JEWS, INC.
DOCUMENT NUMBER: N05000009948	
The enclosed Articles of Amendment and fee are subr	nitted for filing.
Please return all correspondence concerning this matter	er to the following:
Roberta Shevin	
	(Name of Contact Person)
MCCJ	
	(Firm/ Company)
150 SE 2ND AVENUE, SUITE 914	
	(Address)
MIAMI, FLORIDA 33131	
	(City/ State and Zip Code)
roberta@miamiccj.org	
	for future annual report notification)
For further information concerning this matter, please	call:
Roberta Shevin	at (305) 755-6096
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status Certific	\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee ed Copy Certificate of Status (Additional copy is Certified Copy
enclosed)	(Additional Copy is
	enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
I MINIMOSOU, I M J M J I I	Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FILED 2012 FEB -6 AM 11:50

MIAMI COALITION OF CHRIS	STIANS AND JE	EWS, INC.	PETARY OF ETATE.
(Name of Corporation as curren	itly filed with the Fl	orida Dept. of State)	SECRETARY OF STATE
N05000009948			14. 14.
(Docume	ent Number of Corpo	ration (if known)	•
Pursuant to the provisions of section 617 amendment(s) to its Articles of Incorpor		tes, this <i>Florida Not For F</i>	Profit Corporation adopts the following
A. If amending name, enter the new n	name of the corpora	tion:	
MCCJ, INC.			The new
name must be distinguishable and conta "Company" or "Co." may not be used i		ation" or "incorporated" (or the abbreviation "Corp." or " Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		150 SE 2ND AVEN	NUE, SUITE 914
		MIAMI, FLORIDA	33131
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		150 SE 2ND AVEN	NUE, SUITE 914
		MIAMI, FLORIDA	33131
			-
D. If amending the registered agent an new registered agent and/or the ne			ter the name of the
Name of New Registered Agent.	·		
	150 SE 2ND A	VENUE, SUITE 914	4
New Registered Office Address:		(Florida street address)	·
THE PROPERTY OF THE PROPERTY O	Miami		_, _{Florida} 33131
	(City)		(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 4

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.

X Change	<u>PT</u>	John D	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	ones		
X Add	<u>sv</u>	Sally S	mith	N. A.	
Type of Action (Check One)	Title		Name	no changes	Address
I) Change Add Remove		_		· · · · · · · · · · · · · · · · · · ·	
2) Change Add Remove		_			
3) Change Add Remove		- -		·	
4) Change Add Remove		_			
5) Change Add Remove		_			
6) Change Add Remove		- -			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)

The date of each amendment(s) adoption: September 15, 2011					
Effe	ective date if applicable:				
	(no more than 90 days after amendment file date)				
Ado	option of Amendment(s) (<u>CHECK ONE</u>)				
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.				
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
	Dated January , 2012 Signature				
	(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)	•			
	Roberta Shevin				
	(Typed or printed name of person signing)				
	Executive Director				
	(Title of person signing)				