# 1109000005235

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amend CC alicelog

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: CHESED OF S	SOUTH FLORIDA, INC	
DOCUMENT NUM	BER: N09000005235		
The enclosed Articles	of Amendment and fee are sub	mitted for filing.	
Please return all corre	spondence concerning this matt	er to the following:	
		ſ. Lunger	
	(Name of	Contact Person)	
	Chesed of S	South Florida, Inc.	
	(Firm	/ Company)	
	695 NE	174th Street	
	(A	Address)	
	North Miami Be	each, Florida 33162	
		e and Zip Code)	
		sedofflorida.com	
	`	d for future annual report notifica	tion)
For further information	on concerning this matter, please	call:	
S. Yona Lunger		at (305) 300-9662 (Area Code & Daytim	2
(Name	of Contact Person)	(Area Code & Daytim	ne Telephone Number)
Enclosed is a check for	or the following amount made pa	ayable to the Florida Department	of State:
□\$35 Filing Fee	☐ \$43.75 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)
Amer Divis P.O. 1	ng Address dment Section ion of Corporations 30x 6327 nassee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	

#### Articles of Amendment to Articles of Incorporation of

	SOUTH FLORIDA, INC.	
(Name of Corporation as cur	rently filed with the Florida Dept. of S	tate)
N09	9000005235	
(Document Nu	imber of Corporation (if known)	•
Pursuant to the provisions of section 617.1006 the following amendment(s) to its Articles of A. If amending name, enter the new name	Incorporation:	Profit Corporation adop
The new name must be distinguishable and	contain the word "corporation" or "in	corporated" or the
abbreviation "Corp." or "Inc." <u>"Company"</u>	or "Co." may not be used in the name.	22. p
B. <u>Enter new principal office address, if ap</u> Principal office address <u>MUST BE A STRE</u>		<del></del>
	-	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		
	<u> </u>	
D. If amending the registered agent and/or new registered agent and/or the new reg		nter the name of the
Name of New Registered Agent:		<del></del>
New Registered Office Address:	(Florida street address)	·
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if change hereby accept the appointment as register osition.	ging Règistered Agent: ed agent. I am familiar with and acc	ept the obligations of t
	Signature of New Registered Agent, if ch	nanging

## 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	<del></del>		
(attach a	ding or adding additional Art dditional sheets, if necessary). (amended) see attached	icles, enter change(s) here: (Be specific)	
Article IX	(added) see attached		
<del></del>		- wide	

#### ATTACHMENT TO

### "ARTICLES OF AMENDEMENT TO ARTICLES OF INCORPORATION OF CHESED OF SOUTH FLORIDA, INC."

ITEM E.

#### Article III (amended)

Provide immediate direct and indirect assistance to individuals and families in need and crisis. The corporation is organized exclusively for charitable and educational purposes.

#### Article IX (added)

Upon dissolution of the organization, assets shall be distributed for one or more of the exempt purposes within the meaning of IRS Code Section 501 (c) (3) as it exists this date or as amended in the future. Distribution may be made to or through the federal government, state government, local municipal government, for public purpose or to or through a qualifying similar charity under IRS Code Section 501 (c) (3).

If a court of competent jurisdiction is required for the dissolution, then it shall distribute all assets exclusively for the purpose of the organization or to a similar qualifying organization to be used for such purpose.

The date of each amendment(s) adoption: September 3,2009		
Effective date <u>if applicable</u> :	(date of adoption is required) SEPTEMBER 3, 2009	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer was/were sufficient for appr	e adopted by the members and the number of votes cast for the amendment(s) oval.	
There are no members or n adopted by the board of dire	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.	
Dated_Sept	ember 3,2009	
Signature	Show to	
(By have	the charman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	S. Y. Lunger	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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