8/6/2020 11:11:20 AM PST-(GMT-8) FROM: 3058956273-TO: 18506176380 Page: 2 of 7

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: KIM MARKS CPA Account Name Account Number : 120120000072 : (305)895-5815 Phone Fax Number : (305)895-6273

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COR AMND/RESTATE/CORRECT OR O/D RESIGN MECHAYIL EL CHAYIL INC

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COVER LETTER

Division of Corporatio	ns		•	•	
NAME OF CORPORATI	MECHAYIL EL CH	AYIL INC			
DOCUMENT NUMBER:	N20000008056				
The enclosed Articles of Art		nitted for filing.			
Please return all correspond	ence concerning this matte	er to the following:			
Stephen Korn					:
-		(Name of Contact Pe	erson)		
Stephen Korn CPA PA					
		(Firm/ Company	·)		1 2
21150 NE 22nd Ct					20 (415)
		(Address)			5
Miami, FL 33180				·	3.5
-, - , -		(City/ State and Zip	Code)	•	
Stephen@kimmarkscpa.com	n				៏
]	e-mail address: (to be used	for future annual rep	ort notificatio	n)	
For further information con	cerning this matter, please	call:			
Stephen Korn		at		895-5815	
•	(Name of Contact Person))	(Area Code)	(Daytime Telephone !	Vumber)
Enclosed is a check for the	following amount made pa	yable to the Florida l	Department of	State:	•
■ \$35 Filing Pec	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif S Certif	O Filing Fee icate of Status ied Copy tional Copy is used)	-
Division (P.O. Box	ent Section of Corporations 6327	An Div Tb	ret Address nendment Sect vision of Corpo c Centre of T	orations allahassee	
า สาเสกสรร	ce, FL 32314	24	LO IN. IMONTO	Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	of	l.
MECHAYIL EL CHAYIL INC		
Name of Corporation as currently filed with the Flor	ida Dept. of State)	
N20000008056	•	!
(Document N	lumber of Corporation (if known)	<u> </u>
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation adopts the	following
A. If amending name, enter the new name of the corp	oration:	1
name must he distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." o	The new or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)	
C. Enter new mailing address, if applicable:		20 \$150
(Mailing address MAY BE A POST OFFICE BOX)	·	<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		- III - 5
Name of New Registered Agent:	ice address:	-
New Registered Office Address:	(Florida street address)	
	(City) , Florida (Zip Code)	1
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I are	ered Agent: m familiar with and accept the obligations of the position.	
	Signature of New Registered Agent, if changing	<u>i</u> <u>i</u>

H20000266 3543

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	PT John Do V Mike Jo SV Sally St	ones	
Type of Action (Check One)	_Title	Name	Address
1) Change Add	PD	ABRAHAM FEDIDA	4757 NW 67TH AVE LAUDERHILL, FL 33319
× Remove			
2) Change Add	PD	AVRAHAM FEDIDA	4757 NW 67TH AVE LAUDERHILL, FL 33319
Remove 3) Remove Add Remove			i i
4) Change Add			
Remove			<u> </u>
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
-			· · · · · · · · · · · · · · · · · · ·

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The date of each amendment(s) addate this document was signed.	loption: August 4, 2020	, if o	ther than th
Effective date if applicable:	/ 1 001 0	At 1	
Note: If the date inserted in this blo document's effective date on the De	(no more than 90 days after amendment) ock does not meet the applicable statutory filing partment of State's records.		ed as the
Adoption of Amendment(s)	(CHECK ONE)	1	
The amendment(s) was/were ac was/were sufficient for approve	dopted by the members and the number of votes	s cast for the amendment(s)	

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 August 4, 2020 Signature			
(By the chairman or vice chairman of the board, president or other have not been selected, by an incorporator — if in the hands of a reother court appointed fiduciary by that fiduciary)	officer-if directors sceiver, trustee, or		
AVRAHAM FEDIDA			
(Typed or printed name of person signi	ing)		
President and Director			
(Title of person signing)			