709339

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	> #)		
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SECRETARY OF STATE OF STATE OF SORPORAL CONSTRUCTIONS

WIL 7 2015

COVER LETTER .

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Temple Beth Israel, In	nc.		
	709339			
DOCUMENT NUMBER:				
The enclosed Articles of Am	nendment and fee are subm	itted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
Jodi Levy				
	(Name of Contact Pers	on)	
Temple Beth Israel, Inc.				
		(Firm/ Company)		
481 Sawgrass Corporate Par	rkway			
		(Address)	,	
Sunrise, FL 33325				
	(City/ State and Zip Co	ode)	
Jodi-L@tbifl.com				
	-mail address: (to be used	for future annual repor	rt notification	n)
For further information conc	erning this matter, please o	eall:		
Jodi Levy			954-851-9999	
	(Name of Contact Person)	a	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	Collowing amount made pay	able to the Florida De	partment of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & [Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee feature of Status fed Copy tional Copy is osed)
Matthew	Address.	Carre	. 4 . 4 . 4 . 4	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Temple Beth Israel, Inc.		15 JUN 26 PH 12: 43
(Name of Corporation as cur	rently filed with the Fl	
709339		
(Document No	umber of Corporation (if	known)
Pursuant to the provisions of section 617,1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not I</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporal	'ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>(SS</u>)	
	- Andrew Market Control	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(muting numess MAT BE ATOST OFFICE BOA)		
		·
D. If amending the registered agent and/or registered	office address in Florid	ia, enter the name of the
new registered agent and/or the new registered offi		
Name of New Registered Agent:		
	# ## II	(Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe		
I hereby accept the appointment as registered agent. I at	m familiar with and acce	pt the obligations 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.

X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Stuart Delafuente	4860 Winkfield Way
Add			Davie, FL 33331
X Remove			
2) Change	P	Steven Needleman	1670 SW 105th Lane
XAdd			Davie, FL 33324
Remove			
3) Change			
Add			•
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

	heets, if necessary	7. (De specij	<i>(10)</i>					
								
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	· .,						<u> </u>	

	6/19/2015	
The date of each amendment(s) a		, if other than th
date this document was signed.	•	FILED
• -		SECRETARY OF STATE DIVISION OF GORPORATIONS
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendmen	15 JUN 26 PM 12: 43
		ig requirements, this date will not be listed as the
document's effective date on the Do	epartment of State's records.	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a was/were sufficient for approx	adopted by the members and the number of vote val.	es cast for the amendment(s)
☐ There are no members or men adopted by the board of direct	nbers entitled to vote on the amendment(s). Th tors.	ne amendment(s) was/were
Dated	6/22/2015	
Dated		
Signature	6/22/2015 Tachel Saum	
(By the cha	irman or vice chairman of the board, president	or other officer-if directors
	een selected, by an incorporator - if in the hand	ds of a receiver, trustee, or
other court	t appointed fiduciary by that fiduciary)	
<u> </u>	Radiel Baum (Typed or printed name of per	
	(Typed or printed name of per	son signing)
	Treasur	
	(Title of person sig	gning)