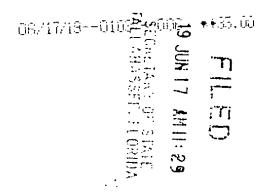
723218

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COVER LETTER

TO: Amendment Section Division of Corporations

K	٠:	

NAME OF CORPORATION	JN:			
DOCUMENT NUMBER:	72318			
The enclosed Articles of Am	endment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matter	r to the following:		
Dr. Oran Daniel Fox				
1	-	(Name of Contact Per	rson)	
Temple Judea of Lee County	y Florida, Inc.			
.		(Firm/ Company)	-	
14486 A & W Bulb Road				
		(Address)	· · · ·	
Fort Myers, FL. 33908				
		(City/ State and Zip C	ode)	
tjswfl@gmail.com				
Е	-mail address: (to be used)	for future annual repo	ort notification	1)
For further information conc	erning this matter, please o	rall:		
Lauren Baugh		at_	239	433-0201
	(Name of Contact Person)		(Arca Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida D	epartment of S	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	cate of Status led Copy lional Copy is
Mailing A			eet Address	
Amendme		Amendment Section		
	f Corporations		ision of Corpe	orations
P.O. Box (ton Building	and a Cinal
Lallahasse	e, FL 32314	266	I Executive C	enter Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

 \mathbf{of}

Temple Judea of Lee County Florida, Inc.

(Name of Corporation as cur	rently filed with the Florida Dept. of State)	
723 DIO		
(Document Nu	imber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopt	ts the following
A. If amending name, enter the new name of the corpo	ration:	
N/A		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Co	rp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRES	<u>SS</u>)	_
		.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
) 	19 19
D. If amending the registered agent and/or registered o	office address in Florida, enter the name of the	i s m
new registered agent and/or the new registered office		
Name of New Registered Agent: N/A		
	(Florida street address)	
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	,
	, Florida	
	(City) (Zip Code	e)
New Registered Agent's Signature, if changing Register		
I hereby accept the appointment as registered agent. I am	i familiar with and accept the obligations of the posit	tion.
	n \ A	
	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	<u>V</u> <u>Mi</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	T	Melvin Goldstein	14486 A & W Buib Road
Add	- 		Fort Myers, FL.
* Remove			33908
2) Change	Т	Dr. Ronald Toll	14486 A & W Bulb Road
* Add			Fort Myers, FL.
Remove			33908
3) Change Add			
Remove			
4) Change			——————————————————————————————————————
Add			
5) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	
	<u></u>

	May 5th, 2019 of each amendment(s) adoption:		_, if other than the
date this do	ocument was signed.		
Effective da	July 1st, 2019 date if applicable:		
	(no more than 90) days afte	r amendment file date)	
	he date inserted in this block does not meet the applicable s s effective date on the Department of State's records.	tatutory filing requirements, this date will not b	e listed as the
Adoption o	of Amendment(s) (CHECK ONE)		
	amendment(s) was/were adopted by the members and the newere sufficient for approval.	imber of votes cast for the amendment(s)	
	e are no members or members entitled to vote on the amend ted by the board of directors.	ment(s). The amendment(s) was/were	
	Signature (By the chairman or vice chairman of the boar have not been selected, by an incorporator – other court appointed fiduciary by that fiduci	if in the hands of a receiver, trustee, or	-
	Dr. Oran Daniel Fox		
	(Typed or printed	name of person signing)	
	President		19
	(Title o	of person signing)	FILED FILED