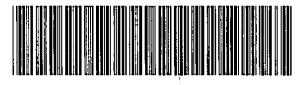
## 749576

| (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  (entified Copies Certificates of Status | (Requestor's Name)                      |
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## COVER LETTER .

TO: Amendment Section

**Division of Corporations** Temple Sinai of Palm Beach County, Inc. NAME OF CORPORATION: 749576 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mark Sickles (Name of Contact Person) Temple Sinai of Palm Beach County (Firm/ Company) 2475 W. Atlantic Ave. (Address) Delray Beach, FL 33445 (City/ State and Zip Code) Mark@TempleSinaiPBC.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mark Sickles 561.276.6161 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified 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 Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation of

| Temple Sinai of Palm Beach County, Inc.  |  | 9              |
|--|--|----------------|
| (Name of Corporation as currently fi   | ed with the Florida Dept. of State)              | <del>ن'`</del> |
| 749576   | · ·  |                |
| (Document Number of  | Corporation (if known)                           | <del></del>    |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this amendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation: | Florida Not For Profit Corporation adopts the f  | following      |
|  |  | The new        |
| name must be distinguishable and contain the word "corporation" "Company" or "Co." may not be used in the name.  | or "incorporated" or the abbreviation "Corp," o  |                |
|  | ı  |                |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  | <u>-</u>   |                |
| · · · · · · · · · · · · · · · · · · ·  |  |                |
|  |  |                |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  |  |                |
|  |  |                |
|  |  |                |
| D. If amending the registered agent and/or registered office add<br>new registered agent and/or the new registered office addres   |  |                |
|  | 3.   |                |
| Name of New Registered Agent:  |  |                |
|  |  |                |
| New Registered Office Address:   | (Florda street address)                          |                |
|  |  |                |
| (Ci  | (Zip Code)                                       |                |
| New Registered Agent's Signature, if changing Registered Agen  | l <u>:</u>                                       |                |
| I hereby accept the appointment as registered agent. I am familiar   | with and accept the obligations of the position. |                |
| Signatu  | re of New Registered Agent, if changing          |                |
|  |  |                |
|  | 1  |                |

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>Mik</u> | <u>i Doc<br/>e Jones<br/>y Smith</u> |                               |
|-----------------------------------|---------------------|--------------------------------------|-------------------------------|
| Type of Action<br>(Check One)     | <u>Title</u>        | <u>Name</u>                          | <u>Addres</u> s               |
| 1) Change                         | Co-Trea:            | Gerald A. Pinsky                     | 10030 Lexington Estates Blvd. |
| Add                               |                     |                                      | Boca Raton, FL 33428          |
| x Remove                          |                     |                                      |                               |
| 2) Change                         | Co-Trea:            | David Stern                          | 2901 S. Ocean Blvd. #804      |
| X Add                             |                     |                                      | Highland Beach, FL 33487      |
| Remove                            |                     |                                      |                               |
| 3) Change                         |                     |                                      |                               |
| Add                               |                     |                                      |                               |
| Remove                            |                     |                                      |                               |
| 4) Change                         |                     |                                      | <del></del>                   |
| Add                               |                     |                                      |                               |
| Remove                            |                     |                                      |                               |
| 5) Change                         |                     |                                      |                               |
| Add                               |                     |                                      |                               |
| Remove                            |                     |                                      |                               |
| 6) Change                         |                     |                                      |                               |
| Add                               |                     |                                      |                               |
| Remove                            |                     |                                      |                               |

| If amending or adding additional Art attach additional sheets, if necessary). | (Be specific)                         |              |             |                |
|---|---------------------------------------|--------------|-------------|----------------|
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| The date of each amendment(s) adopt date this document was signed.                  | ion:   | , if other than th   |
|---|--|----------------------|
| Effective date <u>if applicable</u> :   |  |                      |
|   | (no more than 90 days after amendment file date)   | ,                    |
| Note: If the date inserted in this block of document's effective date on the Depart | loes not meet the applicable statutory filing requirements, this date will ment of State's records.  | not be listed as the |
| Adoption of Amendment(s)  | (CHECK ONE)  |                      |
| The amendment(s) was/were adopt was/were sufficient for approval.                   | ed by the members and the number of votes cast for the amendment(s)  |                      |
| There are no members or members adopted by the board of directors.                  | entitled to vote on the amendment(s). The amendment(s) was/were  |                      |
| 07/28/17<br>Dated   |  |                      |
| Signature A Le  |  |                      |
| ( haye not been so  | or vice chairman of the board, president or other officer-if directors   elected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary) |                      |
| Judith Stern  |  |                      |
| <del></del>   | (Typed or printed name of person signing)  |                      |
| C0-President  | <b>.</b>   |                      |

(Title of person signing)