## 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N00000000071

FILED Feb 13, 2014 Secretary of State

Entity Name: CHABAD LUBAVITCH OF THE PANHANDLE, TALLAHASSEE, INC.

Current Principal Place of Business: New Principal Place of Business:

2601 N MERIDIAN RD. TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

2601 N MERIDIAN RD. TALLAHASSEE, FL 32303

FEI Number: 65-0970446 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

OIRECHMAN, RABBI S
2093 GREENWOOD DRIVE
TALLAHASSEE, FL 32303 US
OIRECHMAN, SHNEIOR Z RABBI
2093 GREENWOOD DRIVE
TALLAHASSEE, FL 32303 US
TALLAHASSEE, FL 32303 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: OIRECHMAN SHNEIOR 02/13/2014

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: OIRECHMAN, SHNEIOR Z RABBI Address: 2093 GREENWOOD DRIVE City-St-Zip: TALLAHASSEE, FL 32303

Title: TD

Name: OIRECHMAN, CHANA
Address: 2093 GREENWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: SD

Name: BISTON, RABBI J Address: 7100 LOXAHATCHEE RD City-St-Zip: PARKLAND, FL 33067

Title: VPD

Name: SALVER, ISAAC

Address: 12550 BISCAYNE BLVD SUITE#701

City-St-Zip: NORTH MIAMI, FL 33181

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHNEIOR Z OIRECHMAN PD 02/13/2014