

N000000002322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

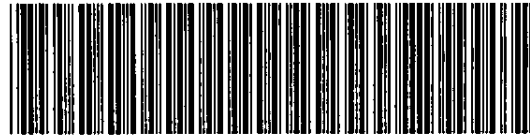
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800242951588

12/26/12--01048--024 \*\*43.75

*Amns*

FILED  
13 JAN 18 AM 8:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 22 2013

T. ROBERTS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 4, 2013

MANI AMINOV  
4016 ROYAL PALM AVE  
MIAMI BEACH, FL 33140

SUBJECT: BUKHARIAN SEPHARDIC JEWISH CENTER OF MIAMI, INC.  
Ref. Number: N00000002322

We have received your document for BUKHARIAN SEPHARDIC JEWISH CENTER OF MIAMI, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

D/B/A is not filed as part of the corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts  
Regulatory Specialist II

Letter Number: 813A00000224

RECEIVED  
13 JAN 18 PM 12:08  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Bukharian Sephardic Jewish Center of Miami, Inc. DBA Beth Eliyahu Mani Bukharian Congregation

**DOCUMENT NUMBER:** N00000002322

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Mani Aminov**

(Name of Contact Person)

Bukharian Sephardic Jewish Center of Miami, Inc. DBA Beth Eliyahu Mani Bukharian Congregation

(Firm/ Company)

**4016 Royal Palm Avenue**

(Address)

**Miami Beach, Florida 33140**

(City/ State and Zip Code)

**mike000747@gmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Mani Aminov**

(Name of Contact Person)

at **( 786 ) 255-6289**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|---|---|--|

**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

FILED

13 JAN 18 AM 8:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

Bukharian Sephardic Jewish Center of Miami, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N00000002322

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: Mani Aminov

4016 Royal Palm Avenue

(Florida street address)

New Registered Office Address:

Miami Beach

(City)

Florida 33140

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept 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.

Example:

|  |           |                    |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u>    |
| <input checked="" type="checkbox"/> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <input checked="" type="checkbox"/> Add    | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u><br>(Check One)   | <u>Title</u> | <u>Name</u>               | <u>Address</u>  |
|--|--------------|---------------------------|---|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>PD</u>    | <u>Haimov, Mark</u>       | <u>3026 Prairie Avenue</u><br><u>Miami Beach, FL 33140</u>    |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>VP</u>    | <u>Pinhasov, Rubenhay</u> | <u>3737 Prairie Avenue</u><br><u>Miami Beach, FL 33140</u>    |
| 3) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>CS</u>    | <u>Aminov, Mani</u>       | <u>4016 Royal Palm Avenue</u><br><u>Miami Beach, FL 33140</u> |
| 4) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>D</u>     | <u>Aminov, Abram</u>      | <u>4016 Royal Palm Avenue</u><br><u>Miami Beach, FL 33140</u> |
| 5) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>P</u>     | <u>Israelov, Edi</u>      | <u>4016 Royal Palm Avenue</u><br><u>Miami Beach, FL 33140</u> |
| 6) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>T</u>     | <u>Duniarov, Dudik</u>    | <u>4016 Royal Palm Avenue</u><br><u>Miami Beach, FL 33140</u> |

*(Attach additional sheets, if necessary)*

*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.*

**Example:**

Address

**X** Add

         Remove

3 )          Change                  \_\_\_\_\_  
              Add                              \_\_\_\_\_  
              Remove                        \_\_\_\_\_

4) \_\_\_\_\_ Change \_\_\_\_\_  
\_\_\_\_\_ Add \_\_\_\_\_  
\_\_\_\_\_ Remove \_\_\_\_\_

5) Change \_\_\_\_\_

Add \_\_\_\_\_

Remove \_\_\_\_\_

6) Change \_\_\_\_\_

Add \_\_\_\_\_

Remove \_\_\_\_\_

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: November 6, 2012

Effective date if applicable: November 6, 2012

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

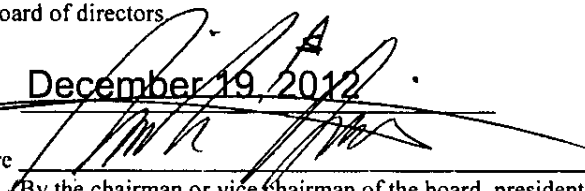
(CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ 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

December 19, 2012

Signature

  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Mani Aminov

(Typed or printed name of person signing)

Chairman - Secretary

(Title of person signing)