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JUN **0 7** 2013 T. 1.35 ACTOR:



COVER LETTER

Division of Corporations CONGREGATION, INC. NAME OF CORPORATION: N06000011334 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) (Firm/ Company) (Address) Miam, +2 (City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (Name of Contact Person) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: ₩ \$35 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

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

TO: Amendment Section

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

Articles of Amendment to Articles of Incorporation

FILED

AMAVAS TORAN CO	NGREGATION, INC.	- 10 M - M P 3 M 0 10 M 0 M 0 M 0 M 0 M 0 M 0 M 0 M 0
(Name of Corporation	n as currently filed with the Florida Dept. of State)	
N06000011334		SECRETARY DE STAPE TALEAHASSEER PLORID
(Docu	ment Number of Corporation (if known)	- Contracting the Contracting
Pursuant to the provisions of section 617.1006, Floarmendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of th	e corporation:	
name must be distinguishable and contain the work "Company" or "Co." may not be used in the nam	d "corporation" or "incorporated" or the abbreviation	The new on "Corp." or "Inc."
B. Enter new principal office address, if applies (Principal office address MUST BE A STREET A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	
D. If amending the registered agent and/or regis new registered agent and/or the new register	stered office address in Florida, enter the name of t	h <u>c</u>
Name of New Registered Agent:	The Tarich Law Firm P.A.	
	1946 Tyler Street	
New Registered Office Address:	(Florida street address)	<u> </u>
	Hollywood , Florid	da 33020
		Code)
lew Registered Agent's Signature, if changing R hereby accept the appointment as registered agent	egistered Agent: I am familiar with and accept the obligations of the	position.
_		
	Signature of New Registered Agent, if changing	ng

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>Mike</u>	Doe c Jones v Şmith		
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s
(Check One)	\subseteq	T. MMI	: COHEN, E	<u>ገ</u> ብ
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The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will neartment of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
was/were sufficient for approval There are no members or membadopted by the board of director Dated Signature (By the chaim	ers entitled to vote on the amendment(s). The amendment(s) was/were	
other court ap	opointed fiduciary by that fiduciary)	
Jamie	Tarich	
-	(Typed or printed name of person signing)	
Vice	e President / Director	
-	(Title of person signing)	