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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	Chabad Israeli Center	of Miami, Inc.				
DOCUMENT NUMBER:	N06000012599		·			
The enclosed Articles of Am	nendment and fee are subm	nitted for filing.				
Please return all corresponde	ence concerning this matter	r to the following:				
	1	Menachem M. Cher	ruty			
		(Name of Contact F	Person)			
	Chaba	ad Israeli Center of	Miami,	lnc.		
		(Firm/ Compar	ny)		 	· ·
		2370 NE 202nd	Street			
		(Address)			<u></u>	
		Miami, FL 3318	30			
		(City/ State and Zip	Code)	 ,		
	R	Rabbi@chabadisrae	li.info			
E	-mail address: (to be used	for future annual re	port not	ification	1)	
For further information conc	erning this matter, please	call:				
Menachem M. Cheruty		a	305 ii		219-3353	
	(Name of Contact Person)			Code)	(Daytime Telepho	one Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida	Departn	nent of S	State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)		Certifi Certifi	0 Filing Fee icate of Status ied Copy tional Copy is secd)	

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

Articles of Amendment Articles of Incorporation

Chabad Israeli Center of Mianti, Inc.		THE THE
(Name of Corporation as cu	irrently filed with the Florida Dept. of State)	AL VIEW
- , , , , , , , , , , , , , , , , , , ,		1
(Document)	Number of Corporation (if known)	
(Document is	variber of Corporation (if known)	
Pursuant to the provisions of section 617.1006. Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation ac	dopts the following
A. If amending name, enter the new name of the corp	ogration:	
		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		·····
D. If amending the registered agent and/or registered	d office address in Florida, enter the name of the	<u> </u>
new registered agent and/or the new registered of	tice address:	
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:		
	Florida	
	(City) (Zip C	
	• •	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I d	tered Agent: am familiar with and accept the obligations of the p	oosition.
	Signature of New Registered Agent, if changing	g

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>Mil</u>	n <u>Doe</u> te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Yosef Segal	2690 N. University Drive #208
Add			Sunrise, FL 33322
X Remove			
2) Change	D	Yaniv Nakash	1061 NE 181st Street
Add			North Miami Beach, FL 33162
D Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)			
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		<u> </u>		

		09/18/2015	
The	e date of each amendment(s) ade	ption:	, if other than the
date	e this document was signed.		
E fC	ostive data if applicable.		
CIII	ective date <u>if applicable</u> :	(no more than 90 days after amendment file da	te)
	te: If the date inserted in this bloc nument's effective date on the Dep	k does not meet the applicable statutory filing require artment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)		(<u>CHECK ONE</u>)	
	The amendment(s) was/were adwas/were sufficient for approva	opted by the members and the number of votes east fo	or the amendment(s)
	There are no members or memb adopted by the board of directo	ers entitled to vote on the amendment(s). The amendes.	ment(s) was/were
	09/18/2015 Dated	- My	
	Signature		·····
	have not bee	nan or vice chairman of the board, president or other n selected, by an incorporator – if in the hands of a re ppointed fiduciary by that fiduciary)	
	Menache	n M. Cheruty	
		(Typed or printed name of person signi	ing)
	Dirctor		
		(Title of person signing)	