N0800000 9705

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Amend

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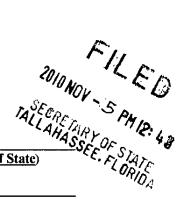
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION:	BNEI YISRAEL, INC	<u>). </u>
DOCUMENT NUMBI	ER:	N08000009705	
The enclosed Articles of	f Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	atter to the following:	
	SHA'F	RON AMOYAL	
	(Name o	of Contact Person)	
	BNEI '	YISRAEL, INC.	
	(Fir	m/ Company)	
	13997 BEA	CH BLVD. SUITE 3	
	1	(Address)	
	JACKSON	NVILLE, FL 32224	
	(City/ St	ate and Zip Code)	
	SHARON29	974@YAHOO.COM	
	E-mail address: (to be us	ed for future annual report not	ification)
For further information	concerning this matter, plea	se call:	
SHA'R	ON AMOYAL	at (904) 669-0	0928
(Name of	Contact Person)	(Area Code & Da	ytime Telephone Number)
Enclosed is a check for	the following amount made	payable to the Florida Departn	nent of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street Address Amendment Section	,
Amendment Section Division of Corporations		Division of Corpor	
P.O. Box 6327		Clifton Building	
Tallahas	see, FL 32314	2661 Executive Co	emer Circie

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



BNEI YISRAEL, INC.

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

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

N08000009705

(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:

Enter new principal office address, if appl incipal office address <u>MUST BE A STREE</u>		
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFI</u> C		
		
If amending the registered agent and/or renew registered agent and/or the new registered Agent:		rida, enter the name of t
		and the state of t

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
upon the dissection or corresponded rederal government and the corresponded rederand	cor adding additional Articles, enter chional sheets, if necessary). (Be specific solution of the organization, assets oses within the meaning of section ding section of any future federal tenment, or to a state or local governsposed of shall be disposed of by the sposed of shall be disposed of shall sh	shall be distributed for one 501(c)(3) of the internal revex code, or shall be distributed for a public purpose.	venue code, ted to the any such
which the pri	ncipal office of the organization is	located, exclusively for such	purposes or
	nization or organizations, as said o		are
organized an	d operated exclusively for such pu	rposes.	

The date of each amendment(s) adoption: 10/28/2010
Effective date <u>if applicable</u> :	(date of adoption is required) 10/28/2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☑ The amendment(s) was/wern was/were sufficient for appro	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or m adopted by the board of dire	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
Dated	10/28/2010
Signature X	ACINE SIDD
have	the chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	SHA'RON AMOYAL
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

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