

N09000005530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

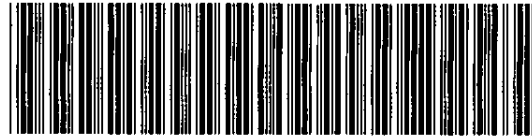
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/12/10--01037--025 **35.00

Amend

RECEIVED
10 NOV 12 PM 12:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2010 NOV 12 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
11/12/10

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Be A Mensch Foundation Inc.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time

2:00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☒ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials



FILED

Articles of Amendment
to
Articles of Incorporation
of

2010 NOV 12 PM 3:19

Be A Mensch Foundation, Inc

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

N090000005530

(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)

2275 South Ocean Drive

UNIT 107N

Palm Beach, FL 33480

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

2275 South Ocean Drive

UNIT 107N

Palm Beach, FL 33480

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:

New Registered Office Address:

(Florida street address)

_____, Florida
(City) (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)

Title	Name	Address	Type of Action
DP	Jack Levine, CPA	16855 NE 2 nd Ave Suite 303 North Miami Beach, FL 33162	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
DPS	Moshe Kaplan, MD	2275 South Ocean Drive UNIT 107N Palm Beach, FL 33480	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
DT	David Wolf, Esq	2275 South Ocean Dr. UNIT 107N Palm Beach FL 33480	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

11. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Please delete David Wolf, Esq (D, T)
16855 NE 2nd Ave, Suite 303, North Miami
Beach FL 33162

Please delete Moshe Kaplan, MD (D, P, S)
16855 NE 2nd Ave, Suite 303, North Miami
Beach FL 33162

The date of each amendment(s) adoption: 11-10-10
(date of adoption is required)

Effective date if applicable: _____
(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 11/10/10

Signature

Jack Levine
(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)

Jack Levine
(Typed or printed name of person signing)

D/P
(Title of person signing)