N0900011922

| (Re | questor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | dress) | · |
| (Ad | ldress) | · · · |
| (Cit | ty/State/Zip/Phone | : #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE

C. LEWIS AUG 23 2013 EXAMMER

COVER LETTER

TO: Amendment Section

| Division of Corporations | | | | |
|--|--|---|--|--|
| NAME OF CORPORATION: Chabad | at USF, Inc. | | | |
| DOCUMENT NUMBER: | 000119 | 22 | | |
| The enclosed Articles of Amendment and fee are sul | bmitted for filing. | | | |
| Please return all correspondence concerning this mat | ter to the following: | | | |
| Aharon D. Backman | | | | |
| - | (Name of Contact Person | n) | | |
| Chabad at USF, Inc. | | | | |
| | (Firm/ Company) | | | |
| 4506 Sweetwater Lake | Drive | | | |
| 33613 | (Address) | | | |
| Tampa, FL 20153 | | | | |
| (City/ State and Zip Code) | | | | |
| rabbipinny@gmail.com | | | | |
| . , , , | ed for future annual report | notification) | | |
| For further information concerning this matter, pleas | e call: | | | |
| Aharon D. Backman at (813) 978-8723 (Name of Contact Person) (Area Code & Daytime Telephone Number) | | | | |
| (Name of Contact Person) | (Area Co | ode & Daytime Telephone Number) | | |
| Enclosed is a check for the following amount made p | payable to the Florida Depa | artment of State: | | |
| ■ \$35 Filing Fee | 2 \$\square\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | Amend Divisio | Address Iment Section on of Corporations Building | | |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FILED

13 AUG 21 AM 9: 00

| Chabad at USF, Inc. | | SECU- |
|---|--|-----------------------------------|
| (Name of Corporation as currently f | iled with the Florida Dept. of State) | TALLAHOSSEY OF S |
| N 09 | 1000011922 | SECRETARY OF S TALLAHASSEE, FL |
| (Docum | ent Number of Corporation (if known) | |
| ursuant to the provisions of section 617.100 nendment(s) to its Articles of Incorporation | 06, Florida Statutes, this <i>Florida Not For Proj</i> i: | fit Corporation adopts the follow |
| If amending name, enter the new name | of the corporation: | |
| | | The n |
| ame must be distinguishable and contain the Company" or "Co." may not be used in the | e word "corporation" or "incorporated" or t e name. | the abbreviation "Corp." or "Inc |
| . Enter new principal office address, if a | pplicable: | |
| Principal office address <u>MUST BE A STR</u> i | | |
| | | <u> </u> |
| | | |
| . Enter new mailing address, if applicat | | |
| (Mailing address MAY BE A POST OF) | FICE BOX | |
| | | |
| | | |
| . *6 | 1.00 | |
| new registered agent and/or the new re | r registered office address in Florida, enter egistered office address: | tne name of the |
| Name of New Registered Agent: | | |
| Nume of New Registered Agem. | | |
| • | (Florida street address) | |
| New Registered Office Address: | , | |
| | | , Florida |
| | (City) | (Zip Code) |
| ew Registered Agent's Signature, if chan hereby accept the appointment as registere | ging Registered Agent: d agent. I am familiar with and accept the or | bligations of the position. |
| | Signature of New Registered Agent, if changin | |

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 us a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change X Remove X Add | <u>PT</u> <u>V</u> <u>SV</u> | John Doo Mike Jor Sally Sm | <u>ies</u> | |
|----------------------------------|------------------------------------|----------------------------------|-------------|-------------|
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| 1) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | - | | |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | 4 |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) |
|---|
| Article III - Purpose clause is amended to include the following languag |
| |
| No part of the net earnings of the Corporation shall inure to the benefit of any membe |
| trustee, director, officer of the corporation, or any private individual (except tha |
| reasonable compensation may be paid for services rendered to or for the corporation), an |
| no member, trustee, officer of the corporation or any private individual shall be entitled to |
| share in the distribution of any of the corporation assets on dissolution of the corporation |
| No substantial part of the activities of the Corporation shall be the carrying o |
| propaganda, or otherwise attempting to influence legislation (except as otherwis |
| provided by IRC §501(h)), and the corporation shall not participate in, or intervene |
| (including the publishing or distribution of statements) any political campaign on beha- |
| of (or in opposition to) any candidate for public office. |
| |
| In the event of dissolution, all of the remaining assets and property of the corporation |
| shall, after necessary expenses thereof, be distributed to another organization exem |
| under IRC §501(c)(3), or corresponding provisions of any subsequent Federal tax laws, |
| to Federal government, or state or local government for a public purpose, subject to the |
| approval of a Justice of the Supreme Court of the State of Florid |
| |
| |
| |

| I he date of | i each ament | iment(s) ac | loption: | , it other than the |
|--------------|-------------------------------|-------------|--|--|
| date this do | cument was s | signed. | | FILED |
| Effective da | ate <u>if applic</u> | able: | | 12 440 |
| | | | (no more than 90 days after amendment fi | FILED 13 AUG 21 SECRETARY AM 9: 00 |
| Adoption o | f Amendme | nt(s) | (CHECK ONE) | SECRETARY OF STATE FALLAHASSEE, FLORIDA |
| | nendment(s) ere sufficient | | lopted by the members and the number of votes of l. | |
| | are no membed by the boa | | pers entitled to vote on the amendment(s). The a prs. | mendment(s) was/were |
| | Dated | 08/19/ | 2013 [.] | |
| | Signature | a. | Buh | |
| | , | have not be | man or vice chairman of the board, president or one selected, by an incorporator – if in the hands of appointed fiduciary by that fiduciary) | |
| | Aha | aron D. | Backman | |
| | | | (Typed or printed name of person signing) | |
| | Dire | ector | | |
| | | | (Title of person signing) | |