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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TORAH ETHICS & CULTURE INC.
DOCUMENT NUMBER: N 100 000 1190 6
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
STEVE KARRO (Name of Contact Person)
TORAH ETHICS & COLTURE (Firm/Company)
726 w 41 ST
(Address)
MIAMI BEACH FL 33/40 (City/ State and Zip Code)
KARROART @ GMAIL COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
STEVE KARRO at 786 660 04/1/ (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& Certificate of Status Certified Copy (Additional copy is enclosed) \$\Bigcup \\$35 Filing Fee \& \Bigcup \\$52.50 Filing Fee \& Certificate of Status Certified Copy (Additional Copy is Enclosed)

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 to Articles of Incorporation of

TORAH ETHICS & CUL	TURF INC		
· · · · · · · · · · · · · · · · · · ·	tly filed with the Florida Dept. of State)		
N 100000 11906	er of Corporation (if known)		
(Document Number	er of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following		
A. If amending name, enter the pew name of the corporati			
EDUCATION, ETHICS &	CULTURE INC. The new ion" or "incorporated" or the abbreviation "Corp." or "Inc."		
"Company" or "Co." may not be used in the name.	ion of incorporated of the dissertation corp. of the		
B. Enter new principal office address, if applicable:	726 W 41 ST MIAMI BEACH FL. 33140		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI BEACH F.L. 33/40		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	726 w 41 ST		
(Maning Busices Mills DE 11 OD 1 O 1 1 OD 2 O 1 O	726 W 41 ST MIAMI BEACH FL 33/40		
D. If amending the registered agent and/or registered office			
new registered agent and/or the new registered office a	ddress:		
Name of New Registered Agent:	0.3c		
	(Florida street address)		
New Registered Office Address:	Florida >		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept the obligations of the position.		
	ignature 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)

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	PT John I V Mike SV Sally	Jones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	DLR	DAVID CRYSTAL	P.O. BOX 416151 MIAMI BEACH FL 33141
2) Change Add Remove	plr	DOMINICK HENRY	2405 SUGAR LANE GASTONIA, NC 28056
3) Change Add Remove			19 JUL 15
4) Change Add Remove			PH 1:50
5) Change Add			
6) Change Add Remove			

If amending or adding additional Ar attach additional sheets, if necessary).	(Be specific)		
			
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	f each amendment(s) accument was signed.	loption:			_, if other than th
Iffective d	ate <u>if applicable</u> :				
		(no more than 90	days after amendment file date)	1	
	e date inserted in this blo s effective date on the De		olicable statutory filing requirem ds.	ents, this date will not l	oe listed as the
doption o	of Amendment(s)	(CHECK ONE)			
	mendment(s) was/were ac ere sufficient for approve		nd the number of votes cast for	the amendment(s)	
	are no members or memed by the board of direct		ne amendment(s). The amendment	ent(s) was/were	
	Dated JULY	11 2019 a Muur			
	Signature Municipality	a Muno		* : = : : : : : : : : : : : : : : : :	_
	have not be		the board, president or other of orator – if in the hands of a rece at fiduciary)		
		STEVE	KARRO		
		(Typed or	r printed name of person signing	g)	
	PA	RESIDENT		Ro CC	19
			(Title of person signing)	### \$5.50 ### \$5.50 ### \$5.50	JUL 15 P
				FLORIO,	PK -: 50