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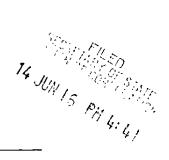
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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations			
NAME OF CORPORATION: SHEMA ISF	RAEL YESHIV	/A INSTITUTE, INC.	
DOCUMENT NUMBER: N110000103	338		
The enclosed Articles of Amendment and fee are subm	itted for filing.		
Please return all correspondence concerning this matter	to the following:	•	
LUIS JOSE BOADA			
	Name of Contact Person	<u> </u>	
QUIK GROUP CORP			
	(Firm/ Company)		
17290 SW 276 ST			
	(Address)		
HOMESTEAD, FL. 3303	1		
(City/ State and Zip Code	2)	
QUIKGROUP@H	OTMAIL.CO	MC	
E-mail address: (to be used	for future annual report r	notification)	
For further information concerning this matter, please c	eall:		
LUIS JOSE BOADA	₃₁ ,786	285-4115	
(Name of Contact Person)	ode & Daytime Telephone Number)		
Enclosed is a check for the following amount made pay	able to the Florida Depa	rtment of State:	
S35 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 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



SHEMA ISRAEL YESHIVA INSTITUTE, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)
N11000010338

(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:

amendment(s) to its Articles of Incorporation:	
A. <u>If amending name, enter the new name of the corporation</u> BETH YESHUA YESHIVA INSTITUTE	
name must be distinguishable and contain the word "corporate" "Company" or "Co." may not be used in the name.	The h
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
 If amending the registered agent and/or registered officenew registered agent and/or the new registered office ac 	
Name of New Registered Agent: N/A	
New Registered Office Address:	Florida street address)
	Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept the obligations of the position.
Signature of New 1	Registered Agent, if changing

Page 1 of 4

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 V SV	John Do Mike Jo Sally Sn	ines	
Type of Action (Check One)	<u>Title</u>		Name	Address
l) Change		_		
Add				
Remove				
2) Change	 			
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change				
Add		_		
Remove				
6) Change		_	4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
Add				
Remove				

If amending or addir (attach additional she	ets, if necessary).	(Be specific)	nge(s) nere.			
(anach aaamonar ano	cis, if theeessary).	(Be apecine)				
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The date of each amendment(s) adoption: JUNE 00, 2014				
date this document was signed. Effective date if applicable: JUNE 06, 2014				
		(no more than 90 days after amendment file date)		
Ade	option of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.		
	There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.		
	Dated 06/0	06/2014		
	Signature	500 D		
	have n	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)		
	JORGE	ORTIZ		
		(Typed or printed name of person signing)		
	PRESI	DENT		
		(Title of person signing)		