N12000004709

(Re	questor's Name)	
· (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section **Division of Corporations**

Coale Sh	er Shalom of North Lauder
NAME OF CORPORATION: CONG. CO	EV STALOM OF NOTTH WADRE
DOCUMENT NUMBER: N120000	4709
The enclosed Articles of Amendment and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	for filing. 15 HAY - 7
Pessa Finn (Nan	357
(Nan	ne of Contact Person)
Cong. Oheu Sha	ne of Contact Person) LOM OF NOTH LAUde Edale, IN Firm/ Company)
	Firm/ Company)
3030 Walvert	
	(Address)
BOCA RATON,	FLORIDA 33434
(City	/ State and Zip Code)
PKF120 @ C E-mail address: (to be used for fi	MAIL. Com uture annual report notification)
For further information concerning this matter, please call:	
PESSA FINN (Name of Contact Person)	at (954) 599-8477 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable	to the Florida Department of State:
(A	3.75 Filing Fee & S\$2.50 Filing Fee rtified Copy Certificate of Status dditional copy is closed) (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

Cong. Oher	Shalow	of North Laur	derdale, INC.
(Name of Corporation as currently	y filed with the Flor	ida Dept. of State)	
N1200000 (Docu	unent Number of Cor	poration (if known)	
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporati		this <i>Florida Not For Profit Corpor</i>	ration adopts the following
A. If amending name, enter the new name Cong. Ohev Shame must be distinguishable and contain "Company" or "Co." may not be used in	ALOM VE		The new wiation " Corp." or " Inc."
B. Enter new principal office address, in (Principal office address MUST BE A ST		1580 N.W. 3rd Deerfield Bea	15T -ch,71a 33442
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		NIA	TS HAY
D. If amending the registered agent and new registered agent and/or the new	registered office ad		
Name of New Registered Agent:	N/A		7:47 7:47
New Registered Office Address:	(F	Florida street address)	
		Florida .	
	(City)	;	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			s of the position.
	<i>∿/∖</i> 3		
	Signature of New R	egistered 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	<u>V</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name		Address
1) Change		N/A		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				**************************************
6) Change		F	 	
Add				
Remove		_		

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
(attach additional sheets, if necessary).	(Be specific)		
<u> N (A</u>	· · · · · · · · · · · · · · · · · · ·		
	* * * * * * * * * * * * * * * * * * *		
			
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The date of each amendment(s) adoption:	, if other than the
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 <u>April 29, 2015</u>	
Signature Persa Jinn	
(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)	
PESSA FINN	
(Typed or printed name of person signing)	
VICE PRESIDENT	
(Title of person signing)	