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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Nubian Temple No 9
DOCUMENT NUMBER: N13 00003123
The enclosed Articles of Amendment and fee are submitted for filing.
The chelosed Articles by Amenanani and fee are submitted for ming.
Please return all correspondence concerning this matter to the following:
Alan B Prager (Name of Contact Person)
(Name of Contact Person)
Nubian Temple No 9 (Firm/Company)
(Firm/ Company)
74 Andover C (Address)
(Address)
W Palm Beach FL 33417
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alan Praget at (561) 301 5970 (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 Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

FILED 20

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	Articles of Incorporation of	14 490 5	,
	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	14 APR 2	4 Al (
Nution lemple	NO. 4 Loc	State State	· Or Kin
(Name of Corporation as currently filed with	th the Florida Dept. of State)	PALLAHASS.	EE, FLO
(Document Nun	nber of Corporation (if known)	 	
ursuant to the provisions of section 617.1006, Flori mendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For F	Profit Corporation adopts the fol	lowing
. If amending name, enter the new name of the	corporation:		
ame must be distinguishable and contain the word	NA	Th	ie new
ame must be distinguishable and contain the word Company" or "Co." may not be used in the name 3. Enter new principal office address, if applicat		or the abbreviation "Corp." or '	'Inc."
Principal office address <u>MUST BE A STREET Al</u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	nox) N/A		
. If amending the registered agent and/or regist new registered agent and/or the new registere		nter the name of the	
Name of New Registered Agent:	N K		
New Registered Office Address:	(Florida street address)		
		, Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing R hereby accept the appointment as registered agent	. I am familiar with and accept the		
Signatui	re of New Registered Agent, if char	eging	

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> <u>Mike</u>	Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Jermaine Williams	809 Cape Cod arch
Add			Valrico
Remove			FL 33594
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
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)			
			· · · · ·
· · · · · · · · · · · · · · · · · · ·			
	 		
	·····		

The date of each amendment(s) adoption:		, if other than the
late this	s document was signed.	
Effectiv	ve date if applicable:	
	(no more than 90 days after amendment file date)	
Adoptic	on of Amendment(s) (<u>CHECK ONE</u>)	
	the amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) as/were sufficient for approval.	
	here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were opted by the board of directors.	
	Dated 4 21 14	
	Signature Olax Pragu	
	(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)	
	Alan B Prager (Typed or printed name of person signing)	
	Registered Agent; Treasurer	
	(Title of person signing)	