## N13000004398

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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION:	nc.	
N13000004398 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are submitted for f	iling.	
Please return all correspondence concerning this matter to the fol	lowing:	
Larry Koppelman		
(Name of	Contact Person)	
Congregation Mekor Shalom, Inc.		
(Firm	(Company)	
14005-A North Dale Mabry Hwy		
(A	(ddress)	
Tampa, FL 33618		
(City/ Stat	e and Zip Code)	
president@mekorshalom.org		
E-mail address: (to be used for future	annual report notification)	
For further information concerning this matter, please call:		
Larry Koppelman	813 at	963-1818
(Name of Contact Person)		Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the	e Florida Department of Sta	ite:
S35 Filing Fee S43.75 Filing Fee S43.75 Certificate of Status Certificate  (Addition enclose)	d Copy Certificational copy is Certified	te of Status   Copy nal Copy is
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

## Articles of Amendment to Articles of Incorporation of

•		p.3	-
		orida Dept. of State)	المنطقة
Ar	ticles of Amendment to	7	93
Art	icles of Incorporation	R. J.	ن مهنی
	of	`హ	· _
ongregation Mekor Shalom, Inc.			<u> </u>
(Name of Corporation as cu	rrently filed with the Flo	orida Dept. of State)	چ. ب
13000004398			ĺ
Document N	umber of Corporation (if)	known)	
rsuant to the provisions of section 617.1006, Florida St endment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not F</i>	For Profit Corporation adopts the following	
If amending name, enter the new name of the corpo	oration:		
		The new	
me must be distinguishable and contain the word "corp	poration" or "incorporate		
ampany" or "Co." may not be used in the name.			
Enter new principal office address, if applicable:			
incipal office address <u>MUST BE A STREET ADDRE</u>	<u>:SS</u> )		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
(Maining againess MAT BEAFOST OFFICE BOX)			
	<del></del>		
If amending the registered agent and/or registered	office address in Florid:	a enter the name of the	
new registered agent and/or the new registered off	ice address:	a, the man of the	
Name of New Registered Agent:			
	<del></del>		
<del></del>	(	(Florida street oddress)	
New Registered Office Address:			
		, Florida	•
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing Registe			
ereby accept the appointment as registered agent. I a	m familiar with and accep	ot the obligations of the position.	
•			
·	Signature of Man Par	internal Areast if shows	
	signature oj New Regi	istered 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Т	Evan Statman	14005-A North Dale Mabry Hwy
Add			Tampa, FL 33618
X Remove			
2) Change	T	Lawrence Koppelman	14005-A North Dale Mabry Hwy
X Add			Tampa, FL 33618
Remove			
3) Change		_	
Add			
Remove			
	,		
4) Change			
Add			,
Remove			`
5) Change			<u> </u>
Add		•	
Remove			
δ) Change			
Add			
Remove			

E. If amending or adding additional Artical (attach additional sheets, if necessary).	(Be specific)
Not Applicable	
	·
	<u> </u>
<del></del>	

July 1, 2016 The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date if applicable:	V- J-6.1
(no more than 90 days after amendment fi	ne aare)
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes of was/were sufficient for approval.	cast for the amendment(s)
There are no members or members entitled to vote on the amendment(s). The a adopted by the board of directors.	mendment(s) was/were
Dated August 25/2016 Signature August 25/2016	
(By the chairman or vice chairman of the board, president or have not been selected, by an incorporator – if in the hands other court appointed fiduciary by that fiduciary)	
Glenn Selig	
. (Typed or printed name of person	ı signing)
President	
(Title of person signir	ng)