NBULLO 4398

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)	
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: CONGREGATION MEKOR SHAKOM, INC.
DOCUMENT NUMBER: N 13000004398
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LAWRENCE KOPPELMAN
(Name of Contact Person)
CONGREGAZION MEROR SHACOM, INC (Firm/Company)
(Firm/ Company)
19717 MURDEN BLUSH DR (Address)
(Address)
(City/State and Zip Code)
(City/ State and Zip Code)
TREASURER @ MEKARSURION ARC
TREASURER @ MEKORSHALDMIORG E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at P13 - 394 - 4222 (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
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

Congregation Meko	or Shalo	m, Inc		
N1300001398	ently filed with the F	lorida Dept. of State)		
(Document Nun	nber of Corporation (i	f known)		
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not</i>	For Profit Corporation ad	opts the foll	owing
A. If amending name, enter the new name of the corpora	ation:			
				ie new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorpora	ted" or the abbreviation "	Corp." or "	Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.	<u>S</u>)			
			 i , ,.	<u></u>
				-20
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	
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				32
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D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		la, enter the name of the	ラデ	414
	. Mod 1635.			
Name of New Registered Agent:				
	·	(Florida street address)		
New Registered Office Address:		,,,		
		, Florida		
	(City)	(Zip C	ode)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am		ept the obligations of the pe	osition.	
	Signature of New Res	gistered Agent, if changing		<u> </u>

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 Doo V Mike Jor SV Sally Sm	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PRESIDENT	GRENN SELIG	14005A N. DALE MADRY HW
Add Remove			TAMPA, FL 33618
2) <a>Change	PRESIDENT	YACL HATFIELD	14005A N. DAIEMARRY HMY
Add			TAMPA, FC 33618
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding ad (attach additional sheets, if	⁽ necessary). (B	Be specific)				
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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)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	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 cast for the amendment was/were sufficient for approval.	nt(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/wer adopted by the board of directors.	е
Dated 3-26-2018	
Dated 3-26-2018 Signature Rawrence Rosselman	
(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, content court appointed fiduciary by that fiduciary)	
LAWRENCE KOPPELMAN	
(Typed or printed name of person signing)	_
TREAJURER	
(Title of person signing)	_