N13000010770

(Req	uestor's Name)	
(Addi	ress)	
(Addi	ress)	
(City/	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	iness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



300322868303

01/08/19--01025--088 **35.00

19 JH - S. PV S. NO.

brund

JAN 1 4 2019

D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Brie Zipora INC	_	
DOCUMENT NUMBER: N 13000010 770		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Janet Haimou		
(Name of Contact Person)	_	
Brei Zigora luc (Firm/Company)	_	
33 NE 1st St		
(Address)	_	<u>.:</u> ;
Miami FL 33132		"T 20%
(City/ State and Zip Code)		191.67 (171)
JANETHAIMOU QOL. COM E-mail address: (to be used for future annual report notification)		
	- 'X	
For further information concerning this matter, please call:	2: 10	22
Tanet Haimou at 786 236-5170 (Name of Contact Person) (Area Code) (Daytime Telephone Number)	_	7.5 7.5 7.5 7.5 7.5 7.5 7.5 7.5 7.5 7.5
(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:		
S35 Filing Fee S43.75 Filing Fee S43.75 Filing Fee Scrifficate of Status (Additional copy is S52.50 Filing Fee Certified Copy		

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

enclosed)

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(Additional Copy is Enclosed)

Articles of Amendment to Articles of Incorporation

BNEI ZIPORA, INC.

(Name of Corporation as cu	rrently filed with t	he Florida Dept, of State)
N13000019	OアアG	
(Document N	umber of Corporation	on (if known)
Pursuant to the provisions of section 617.1006, Florida St amendment(s) to its Articles of Incorporation:	atutes, this Florida	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incor	porated" or the abbreviation "Corp," or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)	
		· · · · · · · · · · · · · · · · · · ·
	.,	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(Manual Manual M		
	-	· ··
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		lorida, enter the name of the
	ice addi ess.	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
New Nextstered Office Address.		
	(City)	, Florida (Zip Code)
	•	(isp exac)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		accent the obligations of the position
The second secon		and the following of the following

Signature of New Registered 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>V</u> <u>Mik</u>	n <u>Doe</u> te Jones y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	<u>S</u> _	Shive Amini	33 NE 1st ST Miami FL 33132
2) Change Add	UP	Janet Haimou	33 NE 1st St Miami FL 33132
Remove 3)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)

upon the dissolution of the organization,
assets shall be distributed for one or more
exempt purposes within the meaning of Section
501(c)(3) of the Internal Revenue Code, or
corresponding section of any future federal
tax code or shall be distributed to the
federal government, or to a state or local
government for a public purpose. Any such
assets not disposed of shall be disposed
of by a count of competent jurisdiction
in the county in witch the principal office
of the organizations, as said Court shall
determine whitch are organized and
operated exclusively for such purposes.
<u> </u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 document's effective date on the Department of State's records.	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 cast for the amen was/were sufficient for approval.	dment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	s/were
Dated 12, 26,18	
Signature (By the chairman or vice chairman of the board, president or other officer-if d have not been selected by an incorporator – if in the hands of a receiver, trus other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of person signing)	