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TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	'ESHIVA UNIVERSITY INTERNATIONAL BETH N	IIDRASH , INCORPOR
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning the	nis matter to the following:	
AVNER BEN YEHUDA MENDES		
	(Name of Contact Person)	
FLORIDA YESHIVA UNIVERSITY INTER	NATIONAL BETH MIDRASH , INCORPORATED	
	(Firm/ Company)	
411 NE 48th STREET		-4
	(Address)	:
POMPANO BEACH, FL 33064		;
	(City/ State and Zip Code)	<u> </u>
ERETS.SION@GMAIL.COM		
E-mail address: (to	be used for future annual report notification)	
For further information concerning this matter	: please call:	
AVNER BEN YEHUDA	786 344-1587	
(Name of Contac	t 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 ☐ \$43.75 Filing Certificate of	g Fee & S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Status Certified Copy (Additional Copy Enclosed)	us
Mailing Address	Street Address	

Mailing Address
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 to Articles of Incorporation of

FLORIDA YESHIVA ACADEMY INC

(Name of Corporation as curr	rently filed with the Florida	Dept. of State)
N13000011171		
(Document Nu	mber of Corporation (if knows	1)
Pursuant to the provisions of section 617.1006, Florida Statamendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Pr	ofit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
FLORIDA YESHIVA UNIVERSITY INTERNATIONAL	BETH MIDRASH , INCORE	PORATED The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated" or	
B. Enter new principal office address, if applicable:	NONE	
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</u>)	 -
		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NONE	7
		;
D. If amending the registered agent and/or registered of new registered agent and/or the new registered offic		er the name of the
NONE		
Name of New Registered Agent:		
New Registered Office Address:	(Florida	street address)
		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	ed Agent:	
I hereby accept the appointment as registered agent. I am		obligations of the position.
	Signature of New Registered	Agent, if changing
		e in the initial re

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)	<u>Title</u>	<u>Name</u>	Address
1) Change		•	
Add			
Remove			
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)				
NONE				

	JUNE 07, 2017	
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 bedocument's effective date on the I	lock does not meet the applicable statutory filing requirements, this date will not Department of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) val.	
☐ There are no members or me adopted by the board of directions.	inbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.	
Dated		
Signature	JAMA	
have not l	airman or vice chairman of the board, president or other officer-if directors been yelected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
RABB	I AVNER BEN YEHUDA MENDES	
	(Typed or printed name of person signing)	
PRESI	DENT	
	(Title of person signing)	