## N1500000 5116

| (Re                                     | equestor's Name)    | _         |  |  |  |
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| PICK-UP                                 | ☐ WAIT              | MAIL      |  |  |  |
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| Certified Copies                        | Certificates        | of Status |  |  |  |
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| Special Instructions to Filing Officer: |                     |           |  |  |  |
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Office Use Only



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2020 J.T. - 3 PH 3: 51

R. WHITE JAN 0 6 2020

## - COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: BNC BO                               | aruch Flor                | ida Inc                              |
|---|---------------------------|--------------------------------------|
|   |                           | •                                    |
| DOCUMENT NUMBER: <u>N1500005</u>                          | 116                       |                                      |
| The enclosed Articles of Amendment and fee are subn       | nitted for filing.        |                                      |
| Please return all correspondence concerning this matte    | r to the following:       |                                      |
|   |                           |                                      |
| Natella Jolia   | AT CC                     | <del> </del>                         |
|   | (Name of Contact Person   | 1)                                   |
|   |                           |                                      |
|   | (Firm/ Company)           | -                                    |
| 831 Spinnaker Dr E  |                           |                                      |
|   | (Address)                 |                                      |
|   |                           |                                      |
| Hollywood, FL 33019                                       | (City/ State and Zip Cod  |                                      |
| ,   | (City/ State and Zip Cod  | e)                                   |
|   |                           |                                      |
| E-mail address: (to be used                               | for future annual report  | notification)                        |
| For further information concerning this matter, please of | rall:                     |                                      |
|   | ,                         |                                      |
| Natella Joliau (Name of Contact Person)                   | at <u>(</u>               | 407) 448 28CO                        |
| (Name of Contact Person)                                  | (Ar                       | sea Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount made pay     | yable to the Florida Depa | irtment of State:                    |
| □\$43.75 Filing Fee □\$43.75 Filing Fee & U               | □\$43.75 Filing Fee &     | □\$52.50 Filing Fee                  |
| Certificate of Status                                     | Certified Copy            | Certificate of Status                |
|   | (Additional copy is       | Certified Copy                       |
|   | enclosed)                 | (Additional Copy is<br>Enclosed)     |
| Mailing Address   | Street                    | Address                              |
| Amendment Section   | Amend                     | ment Section                         |
| Division of Corporations                                  | Dinicio                   | on all Carragrations                 |

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



December 6, 2019

NATELLA JOLIA 831 SPINNAKER DR E HOLLYWOOD, FL 33019

SUBJECT: BNEI BARUCH FLORIDA, INC.

Ref. Number: N15000005116

We have received your document for BNEI BARUCH FLORIDA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a <u>NOT FOR PROFIT</u> corporation it must be signed 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.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II Supervisor

2020 JAN -3 KEINES

Letter Number: 119A00024801

## Articles of Amendment to

Articles of Incorporation

| ONIET B  |
|--|
| DIGET Darrey Floudante   |
| (Name of Corporation as currently filed with the Florida Dept. of State)   |
|  |
| (Document Number of Corporation (if known)   |
| Pursuant to the provisions of section 617,1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
| A. If amending name, enter the new name of the corporation:  |
| The new  |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp," or "Inc."  |
| "Company" or "Co." may not be used in the name.  |
| B. Enter new principal office address, if applicable:  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  |
|  |
|  |
| C. Enter new mailing address, if applicable:   |
| (Mailing address MAY BE A POST OFFICE BOX)   |
|  |
|  |
| <del></del>  |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the   |
| new registered agent and/or the new registered office address:   |
| Name of New Registered Agent:  |
| Name of New Registered Agent: Carl Geven 49 Cedar Circle   |
| (Florida street address)   |
| New Registered Office Address:   |
| Bujntan Beach Borida 33436   |
| (City) (Zip Code)  |
| New Registered Agent's Signature, if changing Registered Agent:  |
| thereby accept the appointment as registered agent. I am familiar with public copy the obligations of the position.  |
|  |
| Signature of New Registered Agent, if changing   |
| Signature of their negativities of 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 Doe<br>te Jones<br>y Smith |                        |
| Type of Action<br>(Check One)     | Title               | <u>Name</u>                  | <u>Addres</u> s        |
| 1) Change                         | PD                  | Todd Kramer                  | 300 Wilshire Blvd      |
| Add                               |                     |                              | Ste 231                |
| X Remove                          |                     |                              | Casselberry FL 32707   |
| 2) Change                         | 50                  | Diana Gordon                 | 70Box 323              |
| Add                               |                     |                              | Osteen FL 32764        |
| X Remove                          | -                   |                              | · -                    |
| 3 ) Change                        | TD                  | Pollyana Pires               | Lo Carnage Hill Cir    |
| Add                               |                     |                              | Casselberry FL 32707   |
| <u>X</u> Remove                   |                     |                              |                        |
| 4) Change                         | PD                  | Carl Geren                   | 49 Cedar Circle        |
| Add                               |                     |                              | Boyton Beach, FL 33436 |
| Remove                            |                     |                              |                        |
| 5) Change                         | <u>50</u>           | Terry Feeney                 | 1109 Charles St.       |
| <b>X_</b> _ Add                   |                     | ,                            | Clearwater FL 33755    |
| Remove                            |                     |                              |                        |
| 6) Change                         | TD                  | Natella Jolia                | 831 Spinnaker Dr. E    |
| <b>X</b> Add                      |                     |                              | Hollywood, FL 33019    |
| Remove                            |                     | Page 2 of 1                  |                        |

| (attach additional | dding additional A<br>sheets, if necessary | ). (Be specifi | c)      |               |   |   |             |  |
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|                    |  |                |         | <b>-</b> .    |   |   |             |  |

| Fhe<br>late | e date of each amendment(s) adoption:  | 12/30/2019   | , if other than the                         |
|-------------|--|--|---|
| Effe        | ective date if applicable: $\frac{1}{(no)}$  | / 2020<br>nore than 90 days after amendment file da  | te)   |
|             | te: If the date inserted in this block does not rument's effective date on the Department of | •  | ements, this date will not be listed as the |
| ١d٥         | option of Amendment(s) (CF   | IECK ONE)  |   |
| Ø           | The amendment(s) was/were adopted by the was/were sufficient for approval.                   | ne members and the number of votes cast fo   | or the amendment(s)                         |
|             | There are no members or members entitled adopted by the board of directors.                  | to vote on the amendment(s). The amend   | .ment(s) was/were                           |
|             | Dated 19/30/2  | 2019   |   |
|             | Signature  | l Sun  | <del></del>                                 |
|             | have not been selected,  | e chairman of the board, president or other<br>by an incorporator – if in the hands of a re<br>iduciary by that fiduciary) |   |
|             | Todo   | Kramer   |   |
|             |  | (Typed or printed name of person signi   | ing)  |

President