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COVER LETTER

TO: Amendment Section Division of Corporations

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MIKDASH MELE NAME OF CORPORATION:	CH NMB, INC.			
N20000005650 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	tter to the following:			
BADIANA HERNANDEZ				
	(Name of Contact F	Person)		
STOK KON + BRAVERMAN				
	(Firm/ Compar	ıy)		
FEAST BROWARD BLVD, SUITE 915				
	(Address)	····		
FORT LAUDERDALE, FL 33301				
	(City/ State and Zip	Code)	· · · · · · · · · · · · · · · · · · ·	-
noachpeled@gmail.com				
E-mail address: (to be us	ed for future annual re	eport notification	on)	
For further information concerning this matter, pleas	se call:			
Badiana Hernandez	a	954 at	237-1777	
(Name of Contact Perso			(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida	Department o	f State:	
S35 Filing Fee		Certi ris Certi (Add	50 Filing Fee ficate of Status fied Copy litional Copy is losed)	

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

MIKDASH MELECH NMB, INC.		
(Name of Corporation as currently filed with the F	orida Dept. of State)	
N2000005650		
(Documen	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the followin
A. If amending name, enter the new name of the co	rporation:	
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorporated	The new all or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable	<u></u>	
(Principal office address MUST BE A STREET ADD	RESS)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>x</u>)	<u></u>
		9.07
D. If amending the registered agent and/or register new registered agent and/or the new registered of	ed office address in Florida, office address:	enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Fl	orida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi	stered Agent:	
I hereby accept the appointment as registered agent.	am familiar with and accept	the obligations of the position.
	Signature of New Registe	ered 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 A Add	PT John D Y Mike Jo SV Sally S	<u>oneş</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
Change Add	D	Rabbi Noach Peled	1500 NE 162 STREET MIAMI, FL 33162
Remove 2) Change Add	<u>D</u>	Marat Filler	1500 NE 162 STREET MIAMI, FL 33162
Remove 3)	D	Jack Grazi	1500 NE 162 STREET MIAMI, FL 33162
4) Change	<u>D</u>	Dovid Weltin	1500 NE 162 STREET MIAMI, FL 33162
Remove 5) Change Add Remove			
6) Change Add Remove			
	g additional Arti	cles, enter change(s) here: (Be specific)	

		
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The date of each amendment(s) adoption date this document was signed.	on:	, 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 do document's effective date on the Departm	nes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

Ц	adopted by the board of directors.
	Dated 11/30/2020
	Signature Coarl PUM
	(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)
	RABBI NOACH PELED
	(Typed or printed name of person signing)
	CEO

(Title of person signing)