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C. BRUMBLEY JAN 1 0 2022

COVER LETTER

10.	Amendment Section
	Division of Corporations

NAME OF CORPORATION:	N BETH SHALOM C	F BRANDON,	INC.
DOCUMENT NUMBER:			· —
The enclosed Articles of Amendment and fee are sui	bmitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
JOHN P. ZELATIS	,		
	(Name of Contact P	'erson)	
ZOMESA, LLC			
	(Firm/ Compan	.y)	
16132 CHURCHVIEW DRIVE SUITE 209 E-F			
	(Address)		
LITHIA, FL 33547			
	(City/ State and Zip	Code)	
JZELATIS@ZOMESA.COM			
E-mail address: (to be use	d for future annual re	port notification	n)
For further information concerning this matter, please	call:		
JOHN P. ZELATIS	at	8 13	654-5144
(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida	Department of S	State:
■ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifia s Certifia	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations	An	eet Address nendment Section vision of Corporation	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the follow amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation:	Name of Corporation as currently filed with the Florida	Dept. of State		
Austiani to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the follow mendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The mame 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 MUST BE A STREET ADDRESS) Enter new malling address MIST BE A STREET ADDRESS) 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: New Registered Office Address: Florida (City) (City) (Zip Code)				
If amending name, enter the new name of the corporation: The many 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. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: (Florida areas address) Florida (City) (Zip Code)	(Document Numb	er of Corporation	on (if known)	
The 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. I. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Florida sweet address	tursuant to the provisions of section 617.1006, Florida Statut mendment(s) to its Articles of Incorporation:	es, this <i>Florida</i> i	Not For Profit Corporation adop	es the following
ame 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. Lenter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Lenter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered sgeat 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: New Registered Office Address: (Florida sweet address) New Registered Office Address: (City) (City) (Zip Code) Extra Company" or "Inc Company" or	. If amending name, enter the new name of the corporat	ilon:		
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New Registered Office Address: (Florida street address) Florida (City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent:	Hume of thew Registered Agent.			<u> </u>
New Registered Office Address:	<u></u>			<u> 교</u>
(City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent:	New Registered Office Address:		(Florida street address)	
(City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent:			Florida	
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		(City)		
ew Registered Agent's Signature, if changing Registered Agent: vereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			, -	
reces wereps are appearance as registered agent. I am jumitar with and accept the voligations of the position.	w Registered Agent's Signature, if changing Registered	Agent:	acont the chlinations of theit	iom
	and the supposition of the suppo	WIGH 127122 (2	ecept the outigutions of the postit	UR.
Signature of New Registered Agent, if changing			11	

If amending the Officers and/or Directors, enter the title and	
If amending the Officers and/or Directors, enter the title and and address of each Officer and/or Director being added:	mame or each officer/director being removed and title, name,
Manda at the state of the cost being anded:	•

(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	PI John I V Mike SV Sally	Jones .	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>T</u>	SUSAN BAYLIS	
X Remove			
2) Change Add	<u>T</u>	DR. SANFORD SCHWARTZ	112 LOCUST DR BRANDON, FL 33511
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. <u>If amending or adding</u> (astach additional shee	ng additional Articles, if necessary).	icles, enter change(s) here: (Be specific)	
	·		-

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		<u> </u>	
The date of each amendment(s) addate this document was signed.	doption:		, if other than t
Effective date <u>if applicable</u> :			
	(no more than 90 days after amend	iment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory partment of State's records.	filing requirements, this date will i	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were as was/were sufficient for approvi	dopted by the members and the number o	f votes cast for the amondment(s)	

There are no men adopted by the bo	obers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.
Dated	NOVEMBER 24, 2021
Signature	
•	(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)
	STEVEN BILLOR
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)