N43428

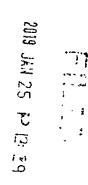
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COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION:Ayts	Chayim Messianic Synagogu	
DOCUMENT NUMBER: N 4342	,	
The enclosed Articles of Amendment and fee are submi	tted for filing.	
Please return all correspondence concerning this matter	to the following:	
Rabbi Jess	e Hutcher	
, , ,	Name of Contact Person)	
Shalon Bo	CG	
	(Firm/ Company)	
1740 Costa 1	Del 501	
	· · · · · ·	
Boca Raton,	FL 33432	
1.0	City/ State and Zip Code)	
office @ Shalom	or future annual report notification)	
E-mail address: (to be used f	or future annual report notification)	
For further information concerning this matter, please co	all:	
Alissa Horta	at 561-487-3839	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made pays	able to the Florida Department of State:	
S35 Filing Fee S43.75 Filing Fee & C Certificate of Status	S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

to

Articles of	Incorporation
	of

Ayfs Chay, m Mess, (Name of Corporation as cur	anic Synugo	194e, inc
(Name of Corporation as cur	rently filed with the Flor	ida Dept. of State)
N 439	128	
(Document Nu	ımber of Corporation (if kı	nown)
Pursuant to the provisions of section 617.1006, Florida Statementment(s) to its Articles of Incorporation:	tutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
Shalo M name must be distinguishable and contain the word "corp	BOCA, INC	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporated	l" 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>		A Same as current
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	Same us Current
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi Name of New Registered Agent:		enter the name of the
	. <u>. </u>	
New Registered Office Address:	(F)	lorida street address)
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I ar	ered Agent:	·
	Signature of New Regis	tered Agent, if changing
		JAN 25

0 6 1

The date of each amendment(s) adoptate this document was signed.	otion: $01/19/2019$, if other than the
Effective date <u>if applicable</u> :	01/19/2019	
Note: If the date inserted in this block locument's effective date on the Depa	(no more than 90 days after amendment file date does not meet the applicable statutory filing requirer rtment of State's records.	
Adoption of Amendment(s)	(CHECK ONE)	
was/were sufficient for approval.	pted by the members and the number of votes cast for	
There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendn is.	nent(s) was/were
Dated	/19/2019 In Brawer	
515101010		
have not been other court ap	an or vice chairman of the board, president or other of selected, by an incorporator – if in the hands of a reconnited fiduciary by that fiduciary)	ceiver, trustee, or
	Typed or printed name of person signing	
	(Typed or printed name of person signing	1g)
	Vice President	
	(Title of person signing)	