

1417884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

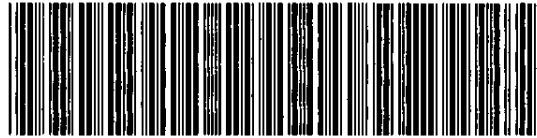
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Amend

[Signature]

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 NOV 30 PM 1:28

FILED



United Muslim Organization of South Florida, Inc.  
Masjid Al Ihsaan

10180 SW 168 Street, Miami, Florida 33157, Telephone: 305-259-0042

November 06, 2009

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

Reference: Amendment to Board of Directors  
Document Number: N47884

Dear Sir/ Madam:

Attached is a request to file an Amendment to the Board of Directors.

This amendment was agreed upon and approved by Members of the Board of Directors during a scheduled Board Meeting held on November 01, 2009 at Masjid Al Ihsaan.

Enclosed is a check in the amount of \$52.50 as filing fee for record and issuance of a certified copy.

I request that you please send the certified copy to the following address.

Mohamed Harris Ishmael  
8576 SW 210 Terrace  
Miami, Florida 33189  
USA

We appreciate your cooperation and immediate attention.

Sincerely,

  
Mohamed Harris Ishmael, Chairman

C.c. Board of Directors.

FILED

2009 NOV 30 PM 1:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

United Muslim Organization of South Florida, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N47884

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* 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 **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

**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:

New Registered Office Address:

(Florida street address)

(City)

, Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered Agent, if changing

(Attach additional sheets, if necessary)

**E. If amending or adding additional Articles, enter change(s) here:**

(attach additional sheets, if necessary). (Be specific)

[illegible]

The date of each amendment(s) adoption: November 01, 2009

*(date of adoption is required)*

Effective date if applicable: November 02, 2009

*(no more than 90 days after amendment file date)*

**Adoption of Amendment(s)**

**(CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated November 06, 2009

Signature

Mohamed Harris Ishmael

(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)

Mohamed Harris Ishmael

(Typed or printed name of person signing)

Vice Chairman

(Title of person signing)