N98000006614

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PICK-UP WAIT	MAIL
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(Document Number)	
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C. LEWIS

MAY 2 7 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SEPHARDIC SYNAGOGUE OF FORT LAUDERDALE - BNM, IN Name of Corporation
DOCUMENT NUMBER: N9800006614
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JENNIFER POSS Name of Contact Person
Firm/Company
3201 BAYVIEW DR. Address
FT. LAUDERDALE, PL 33306 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JENNIFER POSS at (954) 701-4503 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

. . . >

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: SEPHARDIC SYNAGOGUE OF FORT LAUDERDALE-BNM, IN
2. The principal office address: 3296 N. FEDERAL HWY.
FT. LAUDER DALE, FL 33306
3. The mailing address (if different): $P \cdot D \cdot BO \times 11739$
FT. LAUDER DALE, FL 33339
4. Date of incorporation/qualification: 9-9-1997 Document number: N9800006614
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
RESIGNED - ELIAV JECOBY
50 S.E. 12TH ST. APT. 128 ₹
BOCA DATION, EL 33432
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): MORDHAI MAX GOLDMAN 3665 COOPLUM CIR. P.O. Box NOT acceptable COODLAI CREEK FL. 33063
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
JENNIFER POSS, PRESIDENT Signature of an officer or director Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
4-30-2014
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *