I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

DP

SIGNATURE: MENDEL LEVY

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail :

| Title | DP | Title | DS |
|-----------------|-----------------------------|-----------------|----------------------------|
| Name | LEVY, MENDEL | Name | LIND, TUVIA |
| Address | 2815 PRAIRIE AVENUE | Address | 4141 NAUTILUS DRIVE APT 5G |
| City-State-Zip: | MIAMI BEACH FL 33140 | City-State-Zip: | MIAMI BEACH FL 33140 |
| | | | |
| Title | DVP | | |
| Title Name | DVP LEVY, STEPHANIE SAKA | | |
| | | | |

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

2815 PRAIRIE AVENUE MIAMI BEACH. FL 33140 US

DOCUMENT# N1600003438

2815 PRAIRIE AVENUE MIAMI BEACH. FL 33140

Current Principal Place of Business:

FEI Number: 81-1112895

Current Mailing Address:

Name and Address of Current Registered Agent:

Entity Name: CHABAD CHAPLAINCY NETWORK INC.

LEVY, MENDEL 2815 PRAIRIE AVENUE MIAMI BEACH, FL 33140 US

FILED Feb 22, 2018 Secretary of State CC1144465496

Certificate of Status Desired: No

02/22/2018 Date

Electronic Signature of Registered Agent

SIGNATURE:

Date