

01/31/2030 00:53

#4745 P.001/005

N120000002931

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000074643 3)))



H120000746433ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR 21 PM 1:36

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

COR AMND/RESTATE/CORRECT OR O/D RESIGN
COMMUNITY FUNERAL SERVICES CORP

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Amend
10-3/55/12

RECEIVED

12 MAR 21 AM 8:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

H12000074643

Articles of Amendment
to
Articles of Incorporation
of

Community FUNERAL SERVICES Corp

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

N12000002931

(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:

(Florida street address)

New Registered Office 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

FILED
SECRETARY OF CORPORATIONS
12 MAR 21 PM 1:36

H12000074643

H12000074643

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
(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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|----|---------------------|---|
| 1) ☐ Change
☐ Add
☒ Remove | DV | Bryan ZAMORA | |
| 2) ☐ Change
☐ Add
☒ Remove | DV | Dian BUSTAMANTE | |
| 3) ☐ Change
☒ Add
☐ Remove | DV | RAFAEL BARRIO | 6200 FUNSTON ST.
HOLLYWOOD FL
33023 |
| 4) ☐ Change
☒ Add
☐ Remove | DV | ANITA YOUNGKIN | 18326 NW 68TH AVE
#E
MIAMI GARDENS FL
33015-3425 |
| 5) ☐ Change
☐ Add
☐ Remove | DV | CHRISTINE MORRISSEY | 18326 NW 68TH AVE
#E
MIAMI GARDENS FL
33015-3425 |
| 6) ☐ Change
☐ Add
☐ Remove | | | |

H12000074643

H12000074643

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

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

ARTICLE III Purpose:

OUR MISSION IS TO PROVIDE THE
COMMUNITY WITH AN OPTION FOR
FAMILIES IN NEED OF CREMATION
FEES SERVICES.

H12000074643

H12000074643

The date of each amendment(s) adoption: 03-21-12Effective date if applicable: _____
(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 March 21, 2012Signature Nancy Morrissey
(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)Nancy C. MORRISSEY
(Typed or printed name of person signing)DP.
(Title of person signing)

H12000074643