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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS CONWAY SR.

Electronic Signature of Signing Authorized Person(s) Detail

Current Mailing Address:

Current Principal Place of Business:

1101 S. US HIGHWAY 1 FT. PIERCE, FL 34950 US

DOCUMENT# L03000028383

1101 S. US HWY, 1 FORT PIERCE, FL 34950

FEI Number: 04-3768778

Name and Address of Current Registered Agent:

CONWAY, THOMAS SR. 1101 S. US HWY. 1 FORT PIERCE, FL 34950 US

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.

SIGNATURE: THOMAS CONWAY SR

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGR
Name	CONWAY, THOMAS G SR.
Address	1101 S. US HIGHWAY 1
City-State-Zip:	FT. PIERCE FL 34950

Entity Name: FAMILY HERITAGE FUNERAL SERVICES, LLC

FILED Apr 11, 2016 Secretary of State CC5633794469

Certificate of Status Desired: No

04/11/2016 Date

Date

04/11/2016

MANAGER