603020

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SECRETARY OF STA

COVER LETTER

COVERLETTER
TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Farley Funeral Home, Inc.
DOCUMENT NUMBER: 603080
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Name of Contact Person
Lo44 apalach i cola Ra
Menice 72 34285
John - allen - williams & outlook. com E-mail address: (to be used for future annual report notification)
() it-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
HAN Williams at 941 809-8136 Name of Contact Person Area Code & Daytime Telephone Number
V Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Cartificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certificate Of Status

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee

Mailing Address
Amendment Section
Division of Corporations

P.O. Box 6327

Articles of Amendment Articles of Incorporation orporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 644 apalachicola Rd. 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

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

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

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:

X Change	171 John Doe	
X Remove	Y Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) X Change	PD John Williams	Wellie, 72 34285
Add	U	Wellie, 72 34285
Remove 2) X Change	510 Michely 7 Williams	644 Apalachicola Rd. Venice, 7c 34285
AddRemove 3)Change		
Add Remove 4) Change Add		
Remove 5) Change Add		
Remove 6) Change		
Add		

nmending or adding additional A tach additional sheets, if necessary). (Be specific)				
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n amendment provides for an ex	change, reclassificat	ion, or cancellatio	n of issued shares,		
ovisions for implementing the an (if not applicable, indicate N/A)	iendment it not cont	ained in the amen	dment itself:		
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<u>/17</u>					
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The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	
(no more than 90 do	sys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or bonasction was not required.	d of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The nu by the shareholders was/were sufficient for approval.	mber of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were so	officient for approval
by(voting group)	, n
(voting group)	
	mds of a receiver, trustee, or other court
(Typed or printed name	
Presil.	
(Title of person signing	g)

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