

645933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

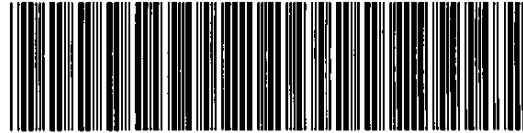
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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name change amend

STATE OF FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

07 JAN 10 PM 4:19

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 JAN 10 PM 4:46

FILED

AT 1/10/10



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 707123 4324348
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 48.75

ORDER DATE : January 10, 2007
ORDER TIME : 2:44 PM
ORDER NO. : 707123-005
CUSTOMER NO: 4324348

DOMESTIC AMENDMENT FILING

NAME: LEVITT WEINSTEIN MEMORIAL
GARDENS, INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER'S INITIALS: _____

The date of each amendment(s) adoption: January 4, 2007

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____."
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signature Judith M. Marshall
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Judith M. Marshall
(Typed or printed name of person signing)

Secretary
(Title of person signing)

FILING FEE: \$35