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## COVER LETTER

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	iers Alliance of Sarason	ta - Manatee,	Inc	<del>- 7.</del>	
DOCUMENT NUMBER:			· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles of Amendment and fee are	submitted for filing.				
Please return all correspondence concerning this r	natter to the following:				
Christopher White					
	(Name of Contact	Person)			
Funeral Consumers Alliance of Suncoast Florida,	. Inc				
	(Firm/ Compa	iny)			
PO Box 15833					
<del> </del>	(Address)				
Sarasota, FL 34277					
	(City/ State and Zi	ip Code)			
FCASuncoastFL@gmail.com					
E-mail address: (to be	used for future annual	report notifica	ation)		
For further information concerning this matter, ple	ease call:			Z023 F1	3 3
Christopher White		941 at	953-3740	17 S	شہ ر
(Name of Contact Per	rson)	(Area Cod	le) (Daytime Tele	phone Number	) 7
Enclosed is a check for the following amount mad	le payable to the Florid	la Department	le) (Daytime Tele t of State: 2.50 Filing Fee		5
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Stat	& EI\$43-75 Filing Fe us Certified Copy (Additional cop- enclosed)	Co y is Co (A	2.50 Filing Fee entificate of Status entified Copy dditional Copy is nelosed)		<i>2</i>
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	1	Street Addre Amendment S Division of Co The Centre o	Section		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Funeral Consumers Alliance of Sarasota - Manatee, Inc.

Name of Corporation as currently filed with th	e Florida D	ept. of State)			
725691				<del>-</del>	
(Docum	nent Numbe	rr of Corporation (i	f known)		
Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation:	orida Statute:	s, this <i>Florida Not</i>	For Profit Corpor	ation adopts the	following
A. If amending name, enter the new name of th	<u>e corporati</u>	on:			
Funeral Consumers Alliance of Suncoast Florida,	Inc				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorpore	ited" or the abbrev	iation "Corp." e	or "Inc."
B. Enter new principal office address, if applica	thle:	3657 Oak Grove I	Drive		
(Principal office address MUST BE A STREET A		Sarasota, FL 342-	13		-
			<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	P.O. Box 15833			-
		Sarasota, FL 3427	7		
				,	21
D. If amending the registered agent and/or reginew registered agent and/or the new register			da, enter the name	e of the	  23 F E B
new registered agent and/or the new register		er F. White		-⊊ <u>`</u> • 11	3 27
Name of New Registered Agent:		<del></del>		The state of the s	
	365 / Oak	Grove Drive		1, 11	<del>- 5</del>
New Registered Office Address:	:		(Florida street address		: 32
	Sarasota			Florida 34243°	
		(Cliy)		(Zip Code)	
New Registered Agent's Signature, if changing by thereby accept the appointment as registered agentical sections.	<mark>Registered</mark> ; nt Lam fan	Agent: uiliar with and acc	ept the obligations	of the position.	
		Can	Elle		
-	Sig	mature of New Res	gistered Agent, if ch	anging	

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 X Remove X Add	<u>V</u>	ohn Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) A Change Add	P	Keith Miller	2300 Fairtield Ave Sarasota, FL 34232
Remove 2)	<u></u>	Rich Gilbert	New Port Richev, FL 34654
Remove Change Add Remove	<u>T</u>	Chuck Treadway	8425 Carrie Lane Sarasota, FL 34238
4) A Change Add	<u>S</u>	Christopher White	3657 Oak Grove Drive Sarasota, FL 34243
Remove  5) Change Add Remove	<u>S</u>	Rosemary "Bo" Galford	6345 S. Tamiami Trail Sarasota, FL 34231
6) A Change Add	<u>TŖ</u>	Nancie Edwards	2428 Goldenrod Street Sarasota, FL 34239
E. If amending or additional sheet		al Articles, enter change(s) here: eary). (Be specific)	

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•	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Llamary 2023	
Effective date if applicable: (no more than 90 days after ame	ndment file data)
<u>Note:</u> If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	ry filing requirements, this date will not be listed as the

(CHECK ONE)

■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

Adoption of Amendment(s)

was/were sufficient for approval.

Da	ed 24 FEB 2023
Sig	nature CIFCUL
	(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)
	Christopher White
	(Typed or printed name of person signing)
	SECRETERY
	(Title of person signing)