

F04000004724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

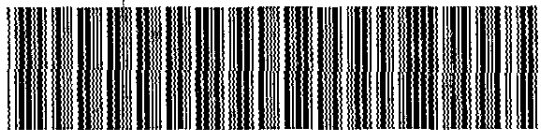
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/18/04--01010--016 **78.75

FILED

04 AUG 18 PM 3:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

04 AUG 18 AM 11:08

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Handwritten signature/initials

CORPDIRECT AGENTS, INC. (formerly CCRS)
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 8/18/04

REF. #: 0163,29180

CORP. NAME: CREMATION SERVICE, INCORPORATED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

1

STATE FEES PREPAID WITH CHECK# 509113 **FOR \$** 78.75

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
|---|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input checked="" type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

FILED
04 AUG 18 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Cremation Service, Incorporated

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Ohio

(State or country under the law of which it is incorporated)

3. 34-1081646

(FEI number, if applicable)

4. January 25, 1971

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1612 Leonard Street

(Principal office address)

Cleveland, Ohio 44113

(Current mailing address)

8. cremation services

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Andrew Service Corporation of Florida

Office Address: 201 N. Franklin Street, Suite 2100

Tampa, Florida 33602

(City)

(Zip code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Andrew Service Corporation of Florida

By 

(Registered agent's signature) **Joseph D. Edwards, Vice President**

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Marilyn A. Nixon

Address: 1612 Leonard Street
Cleveland, Ohio 44113

Vice Chairman: Robert J. Inman

Address: 1612 Leonard Street
Cleveland, Ohio 44113

Director:

Address:

Director:

Address:

B. OFFICERS

President: Marilyn A. Nixon

Address: 1612 Leonard Street
Cleveland, Ohio 44113

Vice President:

Address:

Secretary: Robert J. Inman

Address: 1612 Leonard Street, Cleveland, Ohio 44113

Treasurer: Robert J. Inman

Address: same as above

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Marilyn A. Nixon Robert J. Inman
(Signature of Director or Officer listed in number 12 of the application)

14. MARILYN A. NIXON, PRES. ROBERT J. INMAN
(Typed or printed name and capacity of person signing application)

**UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE**

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show CREMATION SERVICE, INCORPORATED, an Ohio Corporation, Charter No. 406432, having its principal location in Cleveland, County of Cuyahoga, was incorporated on January 25, 1971, and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 9th day of July, A.D. 2004.

J. Kenneth Blackwell
Ohio Secretary of State