F12000001460

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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AND

C. LEWIS

APR 1 0 2014

EXAMINER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: April 4, 2014

Order#: 071812-065

Re: CARRIAGE LIFE EVENTS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Evelyn Wright c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of c	hange is submitted for a corporation or	oso2, 607.1508, or 617.1508, Florida Statutes, this ganized under the laws of the State of DE
		gistered agent, or both, in the State of Florida.
1. The name of	of the corporation: CARRIAGE LIFE EV	'ENTS, INC.
2. The princip	al office address:	
5325 JAE	GER RD NAPLES FL 34109	· · · · · · · · · · · · · · · · · · ·
	g address (if different): ost Oak Blvd. Suite 300, Houstone, TX	77056
4. Date of inco	orporation/qualification: 04/04/2012	Document number: F12000001460
	and street address of the current register coartment of State: (If resigned, enter res	ed agent and registered office on file with the igned)
	CT CORPORATION SYSTEM	
	1200 S PINE ISLAND RD	75 7
	PLANTATION	FL 33324 PR -1
(if changed):		
	Corporation Service Company	
	1201 Hays Street	
		NOT acceptable
	Tallahassee	FL 32301
		eet address of the business office of its registered agent, oted by its board of directors or by an officer so a notified in writing of the change.
authorized by	the board, or the corporation has been	notified in writing of the change.
		Dona Priebe Vice President
I hereby accept further agree performance agent. Or, if hereby confirmations	of my duties, and I am familiar with an	statutes relative to the proper and complete nd accept the obligation of my position as registered reflect a change in the registered office address. I
By:	Mrs. Company	March 31, 2014
	Signature of Registered Agent	Date
If signing on l	behalf of an entity:	
Grace E. Kirb	by Asst. VP	
	Typed or Printed Name	
	* * * FILING	FEE: \$35.00 * * *

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314