Document Number Only

CR2E031 (1-89)

G06994

CT Corporation Syst	em				
Requestor's Name 660 East J efferson	Street				
Address Tallahassee, FL 323	6000027182165 -12/22/9801004001				
City State Zip	Phone		*****35.00	*****35.0	U
CORPORA	ATION(S) NAME				
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Curry & In J	uneral Home,	Inc.	EGRE JAR)	8 DEC 21	
() Profit () NonProfit	() Amendn	nent	OF STATE () Merger	PM 3: 50	
() Foreign	() Dissolut	ion/Withdraw	· · · · · · · · · · · · · · · · · · ·	lability Cor	
() Limited Partnership () Reinstatement () Fictitious Name () Certified Copy	() Annual I ()Name Reg ()UCC-1 Fi () Photo C	gistration inancing Sta	() Other () Change of atement() UCC-3 Fili () CUS	ing 🗠 🔼	
() Call When Ready (x) Walk In () Mail Out	() Will Wai	robiem t	() After 4:30 Pick Up	CONFURATION	
Name Availability Document Examiner	Please Return Ext File Stamped. Th	ra Copies	12/21		
Verifier Acknowledgment	Hope				
W.P. Verifier					

Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1a. The name of the corporation is: Curry & Son Funeral Home, Inc.
1b. Date of incorporation November 1, 1982 Document number G06994
2. The name and address of the current registered agent and office: Keenan L. Knopke
1201 South Orlando Ave., Suite 365, Winter Park, Florida 32789 77. 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida 3332
The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical. Such change was authorized by resolution duly adopted by its board of directors or by officer so authorized by the board. Frank L. Matasavage, Secretary (Type or printed name and title) DATE
AVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT. SIGNATURE BY: Victor Alfano (Registered Agent) Willy AVIDED AGENT. DATE DATE SIC.
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Filing Fee: \$35.00

CR2E045 (7-91)

(FLA. - 2194 - 3/4/92)