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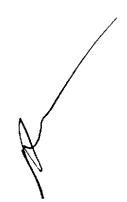
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COVER LETTER

TO: Amendment Section Division of Corporations MR United NAME OF CORPORATION: __ DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RATIBHA GANDHI
Name of Contact Person Firm/ Company Palm Bay Fl 32907

Gity/ State and Zip Code to manage in de yahoo. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (321) 431- 9117

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to les of Inco

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•	Articles of Inco	orporation	
V (2)	Inited	Shc.	A \.
	rporation as currently		In Death Care 25 P 3 13
(Maine of Con	poration as currently	THE WILL THE THORK	
	/D	C	BLIFY WRY OF CTAIL IN TALLATING SEE, FEURIDA
,	(Document Number of	Corporation (if know.	n)
arsuant to the provisions of section 607.1006, Articles of Incorporation:	Florida Statutes, this I	Floridu Profit Corpor	ation adopts the following amendme
. If amending name, enter the new name o	f the corporation:		
	AU		The new
ame must be distinguishable and contain t Corp" "Inc.," or Co.," or the designation ord "chartered," "professional association,"	"Corp." "Inc," or "Corp."	Co". A professional	incorporated" or the abbreviation
. Enter new principal office address, if app	alicable:	A (1)	1
Principal office address MUST BE A STREE	T ADDRESS)		
. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		-	
(Maiting unaress MAT BE A TOST OFT)	CL BOA		
. If amending the registered agent and/or new registered agent and/or the new regi			the name of the
new registered agent and/or the new regi	istered office address.	N D .	
Name of New Registered Agent		Ю н .	
	(Florida str	eet address)	
New Registered Office Address:			, Florida
New Registered Office Address.	<u> </u>	(City)	(Zip Code)
ew Registered Agent's Signature, if changi			
hereby accept the appointment as registered (agent. I am familiar v	with and accept the ob	ligations of the position.
-	Cimana - CAI - D	Consist and I C - t -	and in a
	— Signature of New K	egistered Agent, if cha	inging

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	<u>PT</u>	John Do	<u>)C</u>						
X Remove	Y	Mike Jo	nes						
X Add	<u>sv</u>	<u>Sally Sn</u>	nith						
Type of Action (Check One)	<u>Title</u>		<u>Nam</u>			Address		•	
1) Change	laes	ident		Psatible	<u>Carghi</u>	<u></u>	<u> </u>	lantein	Pork
Add									ه ایک د ا
Remove						FI	35	-937	
2) Change									
Add									
Remove									
3) Change		_							
Add									
Remove									
4) Change		_							
Add									
Remove									
5)Change		_		·					
Add							· · · · · · · · · · · · · · · · · · ·		
Remove									
6) Change		_							
Add									
Remove									

amending or adding additional Articles, enter change(s) here: NA	
tach additional sheets, if necessary). (Be specific)	
	
	<u> </u>
	•
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	4 0.0
rovisions for implementing the amendment if not contained in the amendment itself:	N V
(if not applicable, indicate N/A)	

The date of each amendment(s) ad date this document was signed.	option:				, if other than the
Effective date if applicable:	as	Saon	an s	ent file date)	
Effective date in applicable.	(ne	more than 90 day.	s after amendm	ent file date)	
Note: If the date inserted in this b document's effective date on the De			statutory filing	requirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECH	(ONE)			
☐ The amendment(s) was/were ado by the shareholders was/were su	•		per of votes cas	t for the amendment(s)	
☐ The amendment(s) was/were app must be separately provided for					
"The number of votes cast	for the amendme	nt(s) was/were suff	icient for appro	val	
by		 group)			
	(voting g	group)			
☐ The amendment(s) was/were ado action was not required.	pted by the boar	d of directors witho	out shareholder	action and shareholder	
The amendment(s) was/were ado action was not required.				on and shareholder	
Dated 10	.20.	2017 Lui	-		
Signature	Hluc	dui.			
(By a di selected	rector, president	or other officer – i ator – if in the hand	I directors or o	fficers have not been trustee, or other court	_
	780	H bkc ed or printed name	6	and hi	
	(Тур	ed or printed name	of person signi	ng)	
		Parsid	ent.		
		(Title of per	son signing)		