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(Requestor's Name)
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PICK-UP WAIT MAIL
 -
(Business Entity Name)
, , ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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07/12/06--01054--013 **150.00

CAPITAL CONNECTION, INC.

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Atamily Fineral & Crem Center, Tre.	XX TALLAR SSEE TOOK
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File Conssion
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
,	Driving Record
Requested by:	UCC 1 or 3 File
$\frac{\text{Name}}{\text{Name}} \frac{\text{VL}}{\text{Date}} \frac{2.06}{\text{Time}}$	UCC 11 Search
Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

Certificate of Conversion For "Other Business Entity" Into

THE REPORT OF STATE

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this	
Certificate of Conversion is:	ù l
Certificate of Conversion is: A FAMILY FUNERAL & CREMATION CENTER, INC. PUYOUU 2	16
(Enter Name of Other Business Entity)	' '
2. The "Other Business Endity" is a CORPORATION	
(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)	
first organized, formed or incorporated under the laws ofFLORIDA	
(Enter state, or if a non-U.S. entity, the name of the country)	
onJULY 30, 2004	
(Enter date "Other Business Entity" was first organized, formed or incorporated)	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:	
N/A	
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
A FAMILY FUNERAL & CREMATION, LLC	
(Puter Name of Florida Vimited Liability Company)	

Page 1 of 2

5. If not effective on the date of filing, enter the effective date: 07/12/06 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

Signed this $\frac{1}{2}$	2th da	y of	JULY	2	0 06		 and the same of th
Signature of Au	nthorized F	erson:_//				_	 <u>.</u>
Printed Name:	JOSEPH	S. PINK	<u></u>	Title: _	OWNE	R	

Fees:

Certificate of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Certified Copy: \$30.00 (Optional)

Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	3:
A FAMILY FUNERAL & CREMATION CENT (Must end with the words "Limited Liability Company, "Limit"L.C")	
ARTICLE II - Address: The mailing address and street address of the p Liability Company is:	principal office of the Limited
Principal Office Address:	Malling Address:
1900 W COMMERCIAL BLVD. FT. LAUDERDALE, FL 33309	1900 W COMMERCIAL BLVD. FT. LAUDERDALE, FL 33309
ARTICLE III - Registered Agent, Registere	ed Office, & Registered Agent's

(The Limited Liebility Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

Signature:

The name and the Florida street address of the registered agent are:

J(OSEPH S. PINK		
1900	Ner W COMMERCIAL		
Florid	a street address (P.0	D. Box N	(OT acceptable)
FT.	LAUDERDALE	FL	33309
	City, St	ate, and	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F,S.

fiature (REQUIRED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

· · · · · · · · · · · · · · · · · · ·	ddress:
(Use attachm V: Effective date, if other than the date of filing: L) tive date is listed, the date must be specific and early prior to or 90 days after the date of filing.) COUIRED SIGNATURE: Signature a member an authorized represent (In accordance with section 608.408(3), Florida Strof this document constitutes an affirmation under the that the facts stated herein are trued to the section of signer of Registered Agent.	
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