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## **COVER LETTER**

TO: Registration Section

Division of Corpor	rations		
Division of Corporations  VERO BEACH CREMATORY, LLC  Name of Limited Liability Company  The enclosed Articles of Amendment and feets) are submitted for filing.  Lease return all correspondence concerning this matter to the following:  MARY KOPCHAK  Name of Person  STRUNK FUNERAL HOMES ** CREMATORY, Inc.  File 17 H STREET  Address  VERO BEACH FLORIDA 32960  City/State and Zip Code  MARY OF STH. US  E-mail address:  The first of Person  at 1772 562 2325  Area Code  Daytine Telephone Number  Inclosed is a check for the following amount:  \$\frac{1}{2}\$\$ \$25.00 \text{ Filing Fee} \$\frac{1}{2}\$\$ \$30.00 \text{ Filing Fee} \$\frac{1}{2}\$\$ \$25.00			
The enclosed Articles of An	nendment and fee(s) are sub-	nitted for filing.	
Please return all correspond	ence concerning this matter t	to the following:	
	MARY	KopcHAK_	
	STRUNK F.	ANERAL HOMES 4	CREMATORY, Inc
	•		
	VERO BEA	CIL FLORIDA E	32960
-			
For further information	<i>l /</i> /		ication)
Aidme of Pe	rson	at (772) 562 Area Code Daytime	2 · 2325 : Telephone Number
Enclosed is a check for the t	ollowing amount:		
☐ \$25.00 Filing Fee	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	* Cx	2EDIT ON FILE	
			porations
Tallahassee, FL	32314		e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTÍCLES OF ORGANIZATION **OF**

VERO BEACH CI	ZEMATORY, LLC	
(Name of the Limited Liability Compan (A Florida Limited L	iv as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company velocida document number \(\frac{\textsf{LO800000}}{\text{599}}\).	were filed on Jan 2 2008	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the ab	breviation "DE.C."
Enter new principal offices address, if applicable:	,	CRE CRE
(Principal office address MUST BE A STREET ADDRESS)		883711 -
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a	ddress on our records, enter the nam	e of the new registered
igent and/or the new registered office address here:	<u> </u>	
Name of New Registered Agent:		
New Registered Office Address:		<del> </del>
	Enter Florida street address	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	·

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
M <u>GRM</u>	MARY A. KOPCHAK  IT'S SHOWING ON Sunbia as  Mary, KopcHAK A.  (SEE ATTACHED)	VERO BEACH FL 329	□Add <u>ЬO</u> □Remove
	as		Change
	Mary, Kopcyak A. (SEE ATTACHED)		□Add
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icument's effective date on the Department of State 8 record	3.			
record specifies a delayed effective date, but not an effective	time, at 12:01 ayrn	on the earlier of: (b	) The 90th day i	after the
is filed.	L/l			
ated May 26 . 2020	1/1/	///		
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Signature of a member or aut	horizon and a second	of a mambar		<del>.</del>
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Filing Fee: \$25.00