

L11000057856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

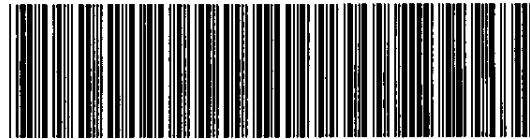
(Business Entity Name)

(Document Number)

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2012 APR -6 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

APR -9 2012

EXAMINER

COVER LETTER

TC Registration Section
Division of Corporations

SUBJECT: ROBERTS-POITIER FUNERAL HOME LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT BURSTEIN

Name of Person

ROBERTS-POITIER FUNERAL HOME LLC

Firm/Company

7630 SW 54 AVENUE

Address

MIAMI, FL 33143

City/State and Zip Code

COCOPLUMBOB@AOL.COM

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

ROBERT BURSTEIN

Name of Person

at (305)

588-0788

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ROBERTS-POITIER FUNERAL HOME LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MAY 16, 2011 and assigned
Florida document number L11000057856.

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This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7630 SW 54 AVENUE
MIAMI, FL 33143

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ROBERT BURSTEIN

New Registered Office Address:

7630 SW 54 AVENUE

Enter Florida street address

MIAMI

City

Florida

33143

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

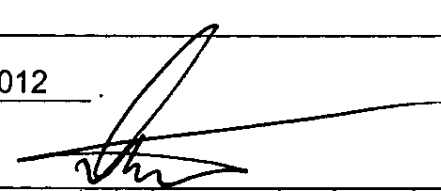
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ARI OBERSTEIN	7003 NORTH WATERWAY DRIVE #203 MIAMI, FL 33155	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	RORY EPSTEIN	2450 WEST SAMPLE ROAD-2 POMPANO BEACH, FL 33073	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ROBERT BURSTEIN	7630 SW 54 AVENUE MIAMI, FL 33143	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

PLEASE NOTE THAT THE ADDRESS ORIGINALLY LISTED ON SUNBIZ FOR
 ARI OBERSTEIN AND RORY EPSTEIN, 4051 LAGUNA STREET, CORAL
 GABLES, FL 33146, HAS ALSO CHANGED. THE CORRECT ADDRESSES
 FOR EACH IS LISTED ABOVE.

Dated 4/1, 2012



Signature of a member or authorized representative of a member

ROBERT BURSTEIN

Typed or printed name of signee