

L11000145678

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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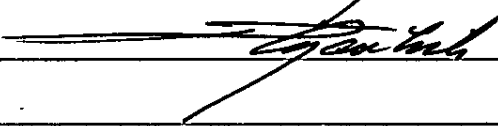
C. LEWIS
JAN 17 2012
EXAMINER

1-10-12

ELIAS R. ZENKICH
4240 GALT OCEAN Dr.
FT. LAUDERDALE FL 33308

TEL- 954-830-8860

check For \$2500 included.

Thank you


Ref: Name change from. SUNSET CASKET LLC
TO: SERENITY CASKETS LLC

P.S. Please SEND New Registration To address Above

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SUNSET CASKET 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:

ELIAS R ZENKICH

Name of Person

SUNSET CASKETS LLC

Firm/Company

4060 GALT OCEAN DR.

Address

FT. LAUDERDALE FL. 33308

City/State and Zip Code

ERZ1@MAC.COM

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

For further information concerning this matter, please call:

ELIAS R ZENKICH

Name of Person

at (954)

830-8860

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

SUNSET CASKET, LLC

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/30/2011 and assigned
Florida document number 100215682001 L11800145678

This amendment is submitted to amend the following:

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

SERENITY CASKETS LLC

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)

ELIAS R. ZENKISH

502 S. DIXIE HWY WEST

POMPANO BEACH FL. 33060

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

ELIAS R. ZENKICH

New Registered Office Address:

4240 GALT OCEAN DR.

Enter Florida street address

FT. LAUDERDALE

Florida

33308

City

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

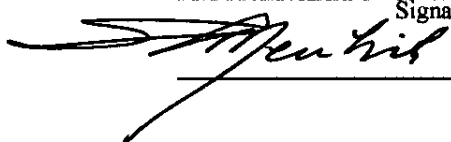
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	LUCIAN GAGO	4060 GALT OCEAN DR. FT. LAUDERDALE FL 33308	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ELIAS R. ZENKICH	502 S. DIXIE HWY WEST POMPANO BEACH FL 33060	<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

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

Dated 01/10/2012, _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signature of a member or authorized representative of a member

ELIAS R. ZENKICH

Typed or printed name of signee