Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000049611 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078 Phone : (407)843-8880

Fax Number : (407)244-5690

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## WEST SIDE CREMATORY LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

K. SALY

FEB 2 2 2017

(H17000049611 3)

2017 FEB 21 AM 9: 48

# AMENDED AND RESTATED ARTICLES OF ORGANIZATION OF WEST SIDE CREMATORY, LLC

#### THIS IS TO CERTIFY THAT:

FIRST: This Amended Restated Articles of Organization amends and restates the Articles of Organization of Advanced Diagnostics and Hearing Solutions, LLC.

SECOND: The original Articles of Organization of West Side Crematory, LLC were filed with the Florida Department of State on July 15, 2013, and assigned Document Number L13000099581.

THIRD: The Articles of Organization of West Side Crematory, LLC are hereby amended and restated by deleting the existing Articles of Organization of West Side Crematory, LLC in its entirety and replacing it with the following:

#### ARTICLE I - NAME:

The name of the Limited Liability Company shall be: West Side Crematory, LLC (the "Company").

#### ARTICLE 11 — ADDRESS:

The mailing address and street address of the principal office of the Company shall be as follows:

805 Mary's Park Place Suite 2 Winter Garden, Florida 34787

#### ARTICLE III - REGISTERED AGENT AND REGISTERED OFFICE:

The address of the initial registered office of the Company in the State of Florida is One Lake Morton Drive, Lakeland Florida 33801, and the name of the registered agent at such address is Keith C. Smith, Esquire.

#### STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

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.

Keith C. Smith, Esquire\_

2017 FEB 21 AM 9: 48

FALLAHASSEE FLORID

(H17000049611 3)

### ARTICLE IV - MANAGEMENT:

The Company shall be managed by one or more managers and the names and addresses of the initial managers are as follows:

Brett Evans 805 Mary's Park Place Suite 2 Winter Garden, Florida 34787

Brock Evans 805 Mary's Park Place Suite 2 Winter Garden, Florida 34787

IN WITNESS WHEREOF, this Amended and Restated Articles of Organization have been duly executed and arc being filed in accordance with Section §605.0202 F.S., this 10 th day of February, 2017.

٠,