

L18000204808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

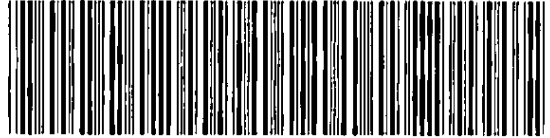
(Business Entity Name)

(Document Number)

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2024 SEP -3 AM 8:51  
OFFICE OF THE CLERK  
TALLAHASSEE, FLORIDA

TO: Division of Corporations

From: Shaquille Bussey

Date: 08/26/24

Re: Change the LLC

Please remove the name:  
Brown and Bussey Funeral Services, LLC

New name:

Tri-County Funeral & Cremation, LLC  
dba Tri-County Funeral & Cremation Services

Contact Number: (561) 924-9237

Thank You

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BROWN AND BUSSEY'S FUNERAL SERVICES, 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:

SHAQUILLE BUSSEY  
Name of Person

TRI-COUNTY FUNERAL + CREMATION SERVICES  
Firm/Company

185 SOUTH BARFIELD HIGHWAY, UNIT B  
Address

PAHOKEE, FL 33476  
City/State and Zip Code

tricityfuneralhome@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shaquille Bussey at (561) 924-9237  
Name of Person 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

BROWN & BUSSEY FUNERAL SERVICES, 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 08/27/2018 and assigned Florida document number L18000204808

This amendment is submitted to amend the following:

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

TRI-COUNTY FUNERAL & CREMATION, LLC

The new name must be distinguishable and contain 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)

185 S. BARFIELD HIGHWAY  
UNIT B  
PAHOKEE, FL 33416

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 212502  
ROYAL PALM BEACH, FL  
33421

**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:

n/a

New Registered Office Address:

n/a

Enter Florida street address

Florida

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 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.*

n/a

**If Changing Registered Agent, Signature of New Registered Agent**

FILED  
2018 SEP -3 AM 8:51  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**MGR = Manager**  
**AMBR = Authorized Member**

[illegible]

[illegible]

09/03/2024

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 08/26 2024

SHAQUILLE BUSSEY

Typed or printed name of signee