Gravest of Florida, Inc. PMB #218 35246 US Hwy. 19 N. Palm Harbor, Florida 34684 City/State/Zip Phone # Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1			
(Corporation Name)		(Document #)	:
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(Corporation Name)		(Document #) *******35。[] ******35。[)Ó -
(Corporation Name)		(Document #)	
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(Corporation Name)		(Document #)	
Walk in	Pick up time _	Certified Copy	-
Mail out	t	☐ Photocopy ☐ Certificate of Status	
NEW FILINGS		<u>AMENDMENTS</u>	
Profit Not for Profit Limited Liability Domestication Other		Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger Amendment Resignation of R.A., Officer/Director	
OTHER FIL	INGS	REGISTRATION/QUALIFICATION -	
Annual I		Foreign Limited Partnership Reinstatement Trademark Other Column Colum	

CR2E031(7/97)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of $\frac{1}{2} \log \frac{1}{2} \log \frac{1}{2} \log \frac{1}{2}$
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation: Gravest of Florida, Infravent of Florida, too.
* PMS 218
* New mailing address + the major to state
2. The mailing address of the corporation:
PMB 218 35246 US Hwy 19 N. Palm Harbor F.
3. Date of incorporation/qualification: 1-25-90 Document number: 144977
4. The name and address of the current registered agent and office:
John C. Hanner ES
1143-45也Ave NE
St. Petership, Fl. 33703
5. The name and address of the new registered agent (if changed) and/or registered office (if changed)2
(P. O. Box Not Acceptable)
Para I Gould SE 3
180 Aickory Lone
Palm Harbor, Fl. 34683
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
(Signature of an officer, chairman or vice chairman of the board) (Date)
(Signature of an officer, chairman or vice chairman of the board) (Date)
DOUGLAS ARMITAGE TREASURER (Printed or typed name and title)
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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 obligation of my position as registered agent.
0 2 15 22
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Penny L. Gould comPFROLLER
(Typed or Frinted Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314