

#1000000000361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500260105335

05/14/14--01013--027 **25.00

FILED

2014 MAY 14 PM 3:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAY 23 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Carriage Team Florida (Funeral), LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amanda Anderson

Name of Person

Carriage Team Florida (Funeral), LLC

Firm/Company

3040 Post Oak Blvd., Suite 300

Address

Houston, TX 77056

City/State and Zip Code

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

For further information concerning this matter, please call:

Amanda Anderson

Name of Person

at (713) 332-8400

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: Carriage Team Florida (Funeral), LLC

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: 02/23/2000

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change: See attached Exhibit "A" for new officer listings

7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

D. J. DeCarlo

Signature of the authorized representative

David J. DeCarlo

Typed or printed name of signee

Filing Fee: \$25.00

FILED
2014 MAY 14 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EXHIBIT "A"

to

AMENDMENT

for

CARRIAGE TEAM FLORIDA (FUNERAL), LLC

FILED

2014 MAY 14 PM 3:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICER/ADDRESS	TITLE
Melvin C. Payne 3040 Post Oak Blvd., Suite 300 Houston, TX 77056	Chief Executive Officer and President
David J. DeCarlo 3040 Post Oak Blvd., Suite 300 Houston, TX 77056	Chairman of the Board and Executive Vice President
L. William Heiligbrodt 3040 Post Oak Blvd., Suite 300 Houston, TX 77056	Vice Chairman, Executive Vice President and Secretary
Carl Benjamin Brink 3040 Post Oak Blvd., Suite 300 Houston, TX 77056	Treasurer