

M 0400000 H252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

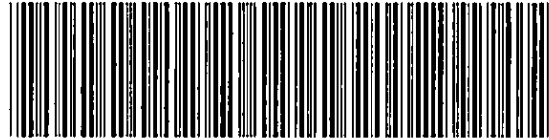
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2024 JAN 30 PM 2:23

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2024 JAN 30 PM 2:13

RECEIVED

# COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** **NORTHSTAR HILLCREST, 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:

**Monica Lisa Gutierrez**  
Name of Person

**NorthStar Memorial Group, LLC**  
Firm/Company

**1900 St. James Place, Suite 300**  
Address

**Houston, TX 77056**  
City/State and Zip Code

**Monica.Gutierrez@nsmg.com**  
E-mail address: (to be used for future annual report notification)

2024 JAN 30 PM 2:23  
SECRETARY OF STATE  
TALLAHASSEE, FL

For further information concerning this matter, please call:

**Kellie Hoover** at ( **850** ) **320-0286**  
Name of Person Area Code & Daytime Telephone Number

**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

**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 (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: NorthStar Hillcrest, LLC

Enter new principal office address, if applicable: \_\_\_\_\_

*(Principal office address  
MUST BE A STREET ADDRESS)*

Enter new mailing address, if applicable: \_\_\_\_\_

*(Mailing address  
MAY BE A POST OFFICE BOX)*

2. The Florida document number of this limited liability company is: M04000004252

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 10/06/2004

2021 JAN 30 PM 2:23  
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TALLAHASSEE, FLORIDA

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**SECTION II (5-9 complete only the applicable changes)**

5. 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.")

6. If amending the registered agent and/or registered officer 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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*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.*

\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

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

\_\_\_\_\_

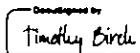
8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

\_\_\_\_\_

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<b>COO, President</b>	<b>John Renfro</b>	<b>1900 St. James Place, Ste. 300</b>	<input checked="" type="checkbox"/> Add
	<b>(Change of Title)</b>	<b>Houston, TX 77056</b>	<input type="checkbox"/> Remove
<b>President, Secretary, &amp; CEO</b>	<b>Brian Sullivan</b>	<b>1900 St. James Place, Ste. 300</b>	<input type="checkbox"/> Add
		<b>Houston, TX 77056</b>	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

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 2011 JAN 30 PM 2:2  
 2011 JAN 30 PM 2:2  
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9. Attached is a 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.

  
 \_\_\_\_\_  
 Signature of the authorized representative

**Timothy A Birch, EVP**  
 \_\_\_\_\_  
 Typed or printed name of signee

**Filing Fee: \$25.00**

**WRITTEN CONSENT**

**OF THE**

**SOLE MEMBER**

**OF**

**NORTHSTAR HILLCREST, LLC**

\_\_\_\_\_  
Date as of September 30, 2023  
\_\_\_\_\_

SECRET  
2024 JAN 30 PM 2:23  
TALLAHASSEE FL 32302

The undersigned, being the sole member (the "Member") of NORTHSTAR HILLCREST, LLC, a Delaware limited liability company (the "Company"), does hereby consent to the adoption of the following resolutions:

**RESOLVED**, that the following persons be, and they hereby are, elected to the offices set forth opposite their respective names below, each to hold office, until the appointment and qualification of their respective successors or until their earlier death, resignation or removal;

<u>Name</u>	<u>Office</u>
John Renfro	President and Chief Operations Officer
James Semesco	Vice President – Operations
Tom Reichert	Chief Sales Officer
Justin Clark	Chief Financial Officer
Timothy A. Birch	Executive Vice President and Assistant Secretary

; and be it further

**RESOLVED**, that all actions taken on behalf of the Company by all persons previously named as officers, and all contracts and arrangements entered into on behalf of the Company heretofore in connection with the organization and operation of the Company, be ratified, confirmed, approved and adopted; and be it further

**RESOLVED**, that Member or any officer of the Company be authorized and empowered to execute all documents and to take any action deemed necessary or advisable to carry out and perform the obligations of the Company as set forth in these resolutions.

IN WITNESS WHEREOF, the Member has caused this consent (which may be executed in counterparts and/or which may be submitted by, among other methods, telecopy or e-mail, including an email which confirms consent hereto) to be executed as of the date first above written.

**MEMBER:**

**NORTHSTAR CEMETERY SERVICES OF FLORIDA, LLC**

By: DocuSigned by:  
Timothy Birch  
Name: Timothy A. Birch  
Title: Executive Vice President

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