

NO70000000711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

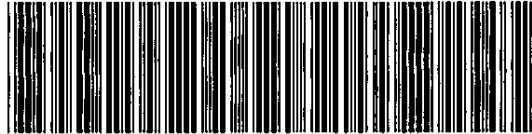
(Business Entity Name)

(Document Number)

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2010 APR 23 AM 9:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend

TB

APR 26 2010

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: SAM SIRIANNI MEMORIAL, INC.

DOCUMENT NUMBER: N07000000711

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL D. RANDOLPH, ESQ.

(Name of Contact Person)

FOWLER WHITE BOGGS BANKER P.A.

(Firm/ Company)

2235 FIRST STREET

(Address)

FORT MYERS, FL 33901

(City/ State and Zip Code)

For further information concerning this matter, please call:

MICHAEL D. RANDOLPH, ESQ.

(Name of Contact Person)

at ( 239 ) 334-7892

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|---|--|---|---|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 9, 2010

MICHAEL D RANDOLPH, ESQ.  
FOWLER WHITE BOGGS BANKER P.A.  
2235 FIRST STREET  
FORT MYERS, FL 33901

SUBJECT: SAM SIRIANNI MEMORIAL, INC.  
Ref. Number: N07000000711

We have received your document for SAM SIRIANNI MEMORIAL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We did not receive all of the pages of the amendment.

We are enclosing the proper form(s) with instructions for your convenience.

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown  
Regulatory Specialist II

Letter Number: 010A00008759

Articles of Amendment  
to  
Articles of Incorporation  
of

SAM SIRIANNI MEMORIAL, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N07000000711

(Document Number of Corporation (if known))

FILED  
2010 APR 23 AM 9:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered Agent, if changing

(Attach additional sheets, if necessary)

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

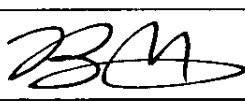

The date of each amendment(s) adoption: December 31, 2007  
(date of adoption is required)

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 4-16-10

Signature  

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

BOBBIE SIZEMORE  
(Typed or printed name of person signing)

DIRECTOR  
(Title of person signing)