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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	lemorial, Inc.
N0700000711 DOCUMENT NUMBER:	
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)
Gray Robinson PA	
·	(Firm/ Company)
1404 Dean Street, Suite 300	
	(Address)
Fort Myers, FL 33901	
	(City/ State and Zip Code)
michael.randolph@gray-robinson.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	lease call:
Michael D. Randolph, Esq.	239 552-4810 at
(Name of Contact Pe	
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	ce & S43.75 Filing Fee & S52.50 Filing Fee atus Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy 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

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	ly filed with the Flo	rida Dept. of State)	
(Document Numbe	r of Corporation (if)	nown)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following	
A. If amending name, enter the new name of the corporation	on:		
		The new	
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on" or "incorporate	d" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		<u>≥%</u> ∞	
	-		
		A 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	÷
C. Enter new mailing address, if applicable:		SEE, of	'n
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac		, enter the name of the	
Name of New Registered Agent:			
	(Florida street address)		
New Registered Office Address:			
	(City)	Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered 2. I hereby accept the appointment as registered agent. I am fan	Agent:	,	
Sic	mature of New Regis	tered Avent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title;

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	$\overline{\underline{V}}$ Mi	in <u>Doe</u> k <u>e Jones</u> l <u>y Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	DIR	Bobbie Sizemore	9275-102 Lake Park Drive
Add			Fort Myers, FL 33911
X Remove			
2) Change	DIR	Stephanie Sirianni	1550 Woodwind Court
X Add			Fort Myers, FL 33919
Remove			·
3) Change			
Add			
Remove			
4) Change			
Add		_	
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	date of each amendmen		_, if other than the
late	this document was signed	1.	
Effe	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
		his block does not meet the applicable statutory filing requirements, this date will not be the Department of State's records.	be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.	
	There are no members or adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated Octo	ber 17, 2018	,
	Signature	e 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 court appointed fiduciary by that fiduciary)	
	Sa	un Sirianni, Jr.	
		(Typed or printed name of person signing)	
	Di	irector	
		(Title of person signing)	