N10000003888

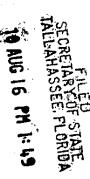
. (Req	uestor's Name)
Thomas D. V. · 730 East Strau Melbourne, E	vbridge A	rve. Suite 200
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	ime)
(Doc	ument Number	r)
Certified Copies	Certificate	es of Status
Special Instructions to F	iling Officer:	





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08/02/10--01023--008 **35.00



Amenda

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ration: <u>Brevard</u>	Funeral Founda	tion, Inc.
DOCUMENT NUM	BER: N1000000	3888	
The enclosed Article	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	Thomas D. L. (Name of	Contact Person)	
	Thomas D. Le	bldron, P.A. n/Company)	
-	730 East Stra	wbridge. Avenue Address)	. Suite 200
	Melbourne (City/ Sta	FL 32901 te and Zip Code)	
 	E-mail address: (to be use	ed for future annual report notific	cation)
For further informati	on concerning this matter, pleas	e call:	
		at (321) 725	- 7^ クク
(Name	of Contact Person)	at (<u>32/</u>) <u>725</u> (Area Code & Dayti	ime Telephone Number)
Enclosed is a check t	or the following amount made p	payable to the Florida Departmen	nt of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cent Tallahassee, FL 3230	er Circle



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 3, 2010

THOMAS D. WALDRON, ESQ. 730 EAST STRAWBRIDGE AVE SUITE 200 MELBOURNE, FL 32901

SUBJECT: BREVARD FUNERAL FOUNDATION, INC.

Ref. Number: N10000003888

We have received your document for BREVARD FUNERAL FOUNDATION, 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):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 410A00018632

2018 AUG 16 AM &: OG

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren		пе гитим рер	i. oi State)
N100000038	<u>88</u>		
(Document Numb	er of Corporati	on (if known)	
uant to the provisions of section 617.1006, Following amendment(s) to its Articles of Inc		this <i>Florida No</i>	t For Profit Corporation
f amending name, enter the new name of	the corporation	<u>n:</u>	
MA			
new name must be distinguishable and correviation "Corp." or "Inc." "Company" or			
Enter new principal office address, if appli incipal office address <u>MUST BE A STREET</u>		_N/A_	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)	N/A	
If amending the registered agent and/or renew registered agent and/or the new regist	tered office add		
	(Flori	da street addres	s)
New Registered Office Address:			, Florida (Zip Code)

position.

N/A
Signature of New Registered Agent, if changing

AMENDED ARTICLES OF INCORPORATION OF BREVARD FUNERAL FOUNDATION, INC

In accordance with Article XII - Amendment, the Articles of Incorporation of Brevard Funeral Foundation, Inc. are hereby and herein amended to include the following Article XIV - Dissolution of Corporation.

Article XIV - Dissolution of Corporation: Upon the dissolution of the corporation, 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 public purposes, any such assets not so disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations as said Court shall determine which are organized and operated exclusively for such purposes.

X Date: 7/28/10 Tom D. Waldron, Esq. President.
STATE OF FLORIDA, COUNTY OF BREVARD.
The foregoing was acknowledged before me this 2 day of , 2010, by Tom D. Waldron, Esq. who is personally known to me or who has produced Florida Drivers Lic. as identification. WITNESS my hand and official seal in the County and State last aforesaid.
Notary Signature (SEAL)
My commission expires Notary Public State of Florida Karen Beaudoin My Commission DD802000 Evulvas 09/09/2012

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)

<u>Title</u>	Name All	<u>Address</u>	Type of Action
	N/A		☐ Add ☐ Remove
(attach ad	ding or adding additional Ar dditional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	

		•	
•			

The date of each amendm	ent(s) adoption: 7/28/10
	(date of adoption is required)
Effective date if applicabl	e;
	(no more than 90 days after amendment file date)
	•
Adoption 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) approval.
There are no members adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were directors.
Dated	8/12/10
Signature	(By the chairman or vice chairman of the board, president or other officer-if director
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or
	other court appointed fiduciary by that fiduciary)
•	Tow J. WACDROW (Typed or printed name of person signing)
	/ RES
	(Title of person signing)