

N39979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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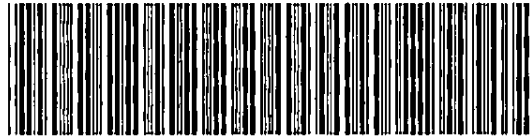
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

11/19/20

Or

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LAKE COUNTY FUNERAL DIRECTORS ASSOCIATION INC

DOCUMENT NUMBER: N39979

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

Please return all correspondence concerning this matter to the following:

TOMMY L. HAYES III
(Name of Contact Person)

LAKE COUNTY FUNERAL DIRECTORS ASSOCIATION INC
(Firm/ Company)

28 W. WOODWARD AVENUE
(Address)

EUSTIS, FLORIDA 32726
(City/ State and Zip Code)

cbeckerbfh@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TOMMY L. HAYES III at (352)-589-4666
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED

LAKE COUNTY FUNERAL DIRECTORS ASSOCIATION, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

N39979

(Document Number of Corporation (if known))

SECRETARY OF STATE
TALLAHASSEE, FL

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:

SAME CORPORATION NAME N/A 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)

28 W. WOODWARD AVENUE
EUSTIS, FLORIDA 32726

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

28 W. WOODWARD AVENUE
EUSTIS, FLORIDA 32726

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:

TOMMY L. HAYES III

28 W. WOODWARD AVENUE

(Florida street address)

New Registered Office Address:

EUSTIS

(City)

Florida 32726
(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.

Tommy L. Hayes III
Signature of New Registered Agent, 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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	PD	TOMMY L HAYES III	28 W. WOODWARD AVE EUSTIS FL 32726
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	STD	LAWRENCE W PAULI	1617 S. BAY STREET EUSTIS FL 32726
3) <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	TR	MICHAEL FLOYD	858 W. MINNEOLA AVE CLERMONT, FL 34711
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	TR	FREDRICK B KURFISS	132 E MAGNOLIA AVE GROVELAND, FL 34736
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	VPD	ROGER BEYERS	1123 W MAIN STREET LEESBURG, FL 34748
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	STD	CHARLES BECKER	806 W MINNEOLA AVE CLERMONT, FL 34711

F. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

NEXT ATTACHED ADDITIONAL SHEET.

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.

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Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|----------|-------------------------|---|
| 1) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add

<input type="checkbox"/> Remove | <u>D</u> | <u>RUTH ANNE YATES</u> | <u>1350 E BURLEIGH BLVD</u>
<u>TAVARES, FL 32718</u> |
| 2) <input checked="" type="checkbox"/> Change
<input type="checkbox"/> Add

<input type="checkbox"/> Remove | <u>D</u> | <u>ARTHUR HILBISH</u> | <u>326 E ORANGE AVE</u>
<u>EUSTIS, FL 32726</u> |
| 3) <input type="checkbox"/> Remove
<input checked="" type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>D</u> | <u>HENRY POSTELL II</u> | <u>210 KNOTT STREET</u>
<u>LEESBURG, FL 34748</u> |
| 4) <input type="checkbox"/> Change
<input type="checkbox"/> Add

<input type="checkbox"/> Remove | _____ | _____ | _____ |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add

<input type="checkbox"/> Remove | _____ | _____ | _____ |
| 6) <input type="checkbox"/> Change
<input type="checkbox"/> Add

<input type="checkbox"/> Remove | _____ | _____ | _____ |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

NO FURTHER CHANGES.

ONLY UPDATE OF CORPORATION OFFICERS & DIRECTORS.

ANNUAL CORPORATION MEETING OCTOBER 5, 2020
RECORDED MINUTES OF MEETING
ELECTION OF OFFICERS AND DIRECTORS
QUORUM ATTENDANCE AND ASSEMBLY BY MAJORITY VOTE

The date of each amendment(s) adoption: OCTOBER 5, 2020, if other than the date this document was signed.

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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

OCTOBER 9, 2020

Signature

Tommy L. Hayes III

(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)

Tommy L. Hayes III

(Typed or printed name of person signing)

PRESIDENT / DIRECTOR

(Title of person signing)