

N95000000727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

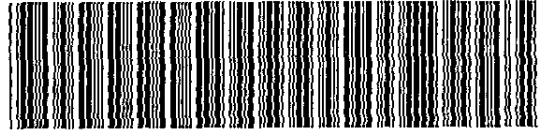
(Business Entity Name)

(Document Number)

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2005 OCT 31 AM 11:58
DIVISION OF CORPORATIONS
SECRETARY OF STATE

Amend.

48
10/31

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MT OLIVE PRIMITIVE CEMETERY, INC

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Martha Kilpatrick
(Name of Contact Person)

Mt Olive Primitive Cemetery, Inc.
(Firm/ Company) OR

4520 Hellamview Ln, PO Box 7114
(Address)

Lakeland, FL 33813 | Lakeland FL 33807-7114
(City/ State and Zip Code)

For further information concerning this matter, please call:

Martha Kilpatrick at (863) 602-9478
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$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)

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 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 11, 2005

MARTHA KILPATRICK
P.O. BOX 7114
LAKELAND, FL 33807-7114

SUBJECT: MOUNT OLIVE PRIMITIVE CEMETERY, INC.
Ref. Number: N95000000727

We have received your document for MOUNT OLIVE PRIMITIVE CEMETERY, 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):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

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) 245-6909.

Velma Shepard
Document Specialist

Letter Number: 705A00061924

RECEIVED
05 OCT 31 AM 8:00
DIVISION OF CORPORATIONS

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2005 OCT 31 AM 11:58

Mount Olive Primitive Cemetery, Inc

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

N9500000127

(Document number of corporation (if known))

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:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (**BE SPECIFIC**)

Added: James Floyd Anderson, PD

125 Shadow Lane, Lakeland, FL 33813

Gilbert O. Lucas, T

5315 Glenmore Drive, Lakeland, FL 33813

Guy Edward Howell, VD

5924 Lunn Rd, Lakeland, FL 33811

Martha N. Kilpatrick, STD

4520 Hallamview Lane, Lakeland, FL 33813

Change: Robert V. Kilpatrick from VD to T

11617 Stephanie Lane, Lakeland, FL 33813

Delete: Benjamin F Rowand

Change Registered Agent to Martha Kilpatrick

4520 Hallamview Lane, Lakeland, FL 33813

(Attach additional pages if necessary)

(continued)

The date of adoption of the amendment(s) was: August 17, 2005

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 was sufficient for approval.
- There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature

Martha N Kilpatrick

(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.)

MARTHA N KILPATRICK

(Typed or printed name of person signing)

Secretary Treasurer

(Title of person signing)

FILING FEE: \$35