PO2000103547

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R-A. C. G. C.COULLIETTE

SEP -8 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations		,				
SUBJECT: FLORIDA FUN	NERAL HOME & CF Name of Corporati	REMATORY, INC.				
DOCUMENT NUMBER:	P0200010)3547				
The enclosed Statement of Change	of Registered Office/Agent	and fee are submitted for filing.				
Please return all correspondence con	ncerning this matter to the f	following:				
VINCENT SHARKEY						
	Name of Contact Per	rson				
	Firm/Company					
	,					
1107 LAKE AVENUE						
Address						
LAKE WORTH, FL 33460						
City/State and Zip Code						
V.	SHARKEY @ALLCOUN	ITY.COM				
E-mail address	: (to be used for future ar	nnual report notification)				
For further information concerning	this matter, please call:					
VINCENT SHAR	KEY at (_	561) 307-2075				
Name of Contact Per	rson A	rea Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made pa	ayable to the Department of	State.				
P.O. Box 6	nt Section of Corporations	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

TO:

• STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a cor	poration organize	507.1508, or 617.1508, Flo d under the laws of the Stat d agent, or both, in the Stat	te of FLORIDA
1. The name of t	he corporation: FLORI	DA FUNERA	AL HOME & CREM	IATORY, INC.
2. The principal	office address: 1495 NV	V 17TH AVEN	UE	
	MIAMI,	FL 33125		
3. The mailing a	ddress (if different): 110	7 LAKE AVEN	UE	
	LAF	KE WORTH, FI	L 33460	
4. Date of incorp	ooration/qualification:	9/25/02	Document number:	P02000103547
	street address of the curre tment of State: (If resigne	•	t and registered office on f	ile with the
	BRIAN GARGIS			
	1495 NW 17TH AVI	ENUE		
	MIAMI, FL 33125			, al:
6. The name and (if changed):			f changed) and /or register	ed office NISION OF C
	VINCENT SHARKE	: Y		CORR.
	1107 LAKE AVENU	P.O. Box NOT ac	centable	— 4 70 %
	LAKE WORTH, FL ;		ecpubic	5
-	ess of its registered office be identical.	and the street add	dress of the business office	
authorized by th	is authorized by resolution to board, or the corporation	on has been notifi	y its board of directors or ed in writing of the chang	ge.
15	e of an officer or director		BRIAN GA	ARGIS
I further agree i of my duties, an document is bei	o comply with the provis	ions of all statute accept the obliga a change in the re	gree to act in this capacit s relative to the proper at tion of my position as reg egistered office address, I	id complete performance
Upu (nature of Registered Agent		23/11 Date	
If signing on be	half of an entity:			
Uluce S	horlen			
Ty	ped or Printed Name			

* * * FILING FEE: \$35.00 * * *