# P0900091013

| (Re                     | equestor's Name)      |                                       |
|-------------------------|-----------------------|---------------------------------------|
| (Ac                     | ddress)               | · ·                                   |
| (Ac                     | ddress)               |                                       |
| (C                      | ty/State/Zip/Phone #) |                                       |
| PICK-UP                 | WAIT                  | MAIL                                  |
| . · (Bi                 | usiness Entity Name)  | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| ; (D                    |                       | · · · · · · · · · · · · · · · · · · · |
| · (D                    | ocument Number)       |                                       |
| Certified Copies        | Certificates of       | Status                                |
| Special Instructions to | Filing Officer:       |                                       |
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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF COR          | PORATION:                                    | Heavenly Resting Places   | Inc            |  |
|----------------------|--|---|----------------|--|
| DOCUMENT NU          | MBER:  | R:P0900091013   |                |  |
| The enclosed Artic   | cles of Amendment and fee a                  | are submitted for filing.   |                |  |
| Please return all co | orrespondence concerning the                 | is matter to the following:   |                |  |
|                      | · .  | Gary Levine   |                |  |
|                      | •  | · <del></del>   |                |  |
|                      | Tra  | nslation Registry Inc<br>Firm/ Company  |                |  |
|                      | 8477   | ′1 Overseas Highway   |                |  |
|                      |  | Address   |                |  |
|                      |  | amorada, FL 33036   | <del></del>    |  |
|                      |  |   |                |  |
|                      | E-mail address: (to be use                   | y77@gmail.com d for future annual report notification)  |                |  |
| For further inform   | ation concerning this matter,                | please call:  |                |  |
|                      | Gary Levine                                  | at ( 305 ) 30   | 0-3733         |  |
| Name                 | of Contact Person                            | Area Code & Daytime Tele  |                |  |
| Enclosed is a chec   | k for the following amount n                 | nade payable to the Florida Departm   | nent of State: |  |
| □\$35 Filing Fee     | ☐ \$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)                                      |                |  |
| P.O. Box 6           | nt Section<br>f Corporations                 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle |                |  |

Tallahassee, FL 32301

#### **Articles of Amendment** Articles of Incorporation of

|                 | 2009 11        | FILED                         |
|-----------------|----------------|-------------------------------|
| Dept. of State) | _FALLAHA<br>—— | OV 19 PM 10: 19 SSEE. FLORIDA |

### Heavenly Resting Places Inc (Name of Corporation as currently filed with the Florida) P09000091013 (Document Number of Corporation (if known)

owing

| Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:   | tes, this Florida Profit Corporation adopts the following |  |
|--|---|--|
| A. If amending name, enter the new name of the corporation   | <u>en:</u>  |  |
| Translation Registry   | inc The new   |  |
| name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associ | Corp," "Inc," or "Co". A professional corporation         |  |
| B. Enter new principal office address, if applicable:  | 84771 Overseas Highway                                    |  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | Islamorada, FL 33036                                      |  |
|  |   |  |
| C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)  | 84771 Overseas Highway                                    |  |
|  | Islamorada, FL 33036                                      |  |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent:                             |   |  |
| New Registered Office Address: (Flor   | ida street address)                                       |  |
| (Ct.)  | , Florida   |  |
| (City)   | (Zip Code)  |  |
| New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam   |   |  |
| 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)

| <u>Title</u> | <u>Name</u>   | <u>Address</u>   | Type of Action |
|--------------|---|--|----------------|
| <del></del>  |   |  |                |
|              |   |  |                |
| <del></del>  |   |  | ☐ Add ☐ Remove |
|              | ding or adding additional And ditional sheets, if necessary). |  |                |
| provisi      |   | schange, reclassification, or cancell<br>nendment if not contained in the am |                |
|              | · · · · · · · · · · · · · · · · · · ·                         |  |                |
|              |   |  |                |
| <del></del>  |   |  |                |

| The date of each amendmen                        | t(s) adoption: November 10, 2009  |
|--|---|
| Effective date <u>if applicable</u> :            | January 1, 2010 (date of adoption is required)  |
|  | (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)                         | (CHECK ONE)   |
|  | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.   |
|  | ere approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):  |
| "The number of votes                             | cast for the amendment(s) was/were sufficient for approval  |
| by   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |
| •  | (voting group)  |
| The amendment(s) was/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder   |
| Dated_Nov  | ember 10, 2009  |
| Signature _                                      | 185   |
| sel  | y a director, president or officer officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
|  | Gary Levine   |
|  | (Typed or printed name of person signing)   |
|  | President   |
|  | (Title of person signing)   |