(Re	equestor's Name)		
(Ad	Idress)		
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(Cit	ty/State/Zip/Phone	e #)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: IN ter Nation	nal Cremation Se	IUIUS INC
DOCUMENT NUMBER: P1000008952		
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Challes GENTY Name of		
Name of	Contact Person	
Accounting = T	Company	
Firm	/ Company	
1583 J. Bolcho	PJ. STE A	
A	Address	
Clear nates, Fl	3376 Y	
City/ Stat	e and Zip Code	
E-mail address: (to be used for ful	ure annual report notification)	
For further information concerning this matter, please	call:	
Chalbs Gerty 2 Name of Contact Person	at (737) 230 – 69 Area Code & Daytime Telej	ohone Number
Enclosed is a check for the following amount made pa	ayable to the Florida Departn	nent of State:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendment Section A Division of Corporations D P.O. Box 6327	Areet Address Amendment Section Division of Corporations Clifton Building 661 Executive Center Circle	

Tallahassee, FL 3230i

Articles of Amendment to

of	Ja ON SALE
INternational Cremation Services INC.	S CORDS
(Name of Corporation as currently filed with the Florida Dept. of State)	Py Alle
P100000 89500	2. Car
(Document Number of Corporation (if known)	V

amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporate	tion:	
Trinity Cremation Services	INCThe new	
TCINITY Cre MATION Services name must be distinguishable and contain the word "co abbreviation "Corp.," "Inc.," or Co.," or the designation " name must contain the word "chartered," "professional asso	"Corp," "Inc," or "Co". A professional corporation	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	New Port Dichey Flay 1652	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	New Port Pichey, Fl. 34652	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office and agent and/or registered office and agent agent and/or registered office and agent agent agent and/or registered office and agent age		
Name of New Registered Agent:		
New Registered Office Address: (Fl	(Florida street address)	
·	ty) (Zip Code)	
(Ci	ty) (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		
Signature of N	ew Registered Agent, if changing	

Page 1 of 3

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) Type of Action **Address** <u>Name</u> <u>Title</u> ☐ Add☐ Remove _ 🗖 Add ☐ Remove _ _ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) adoption: January 3, 2011
(date of adoption is required)
Effective date if applicable: 50000 (no more than 90 days after amendment file date)
' (no more than 90 days dfter amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided 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"
by" (voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 1-3-2011
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
President (Title of person signing)