

P110000 25215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

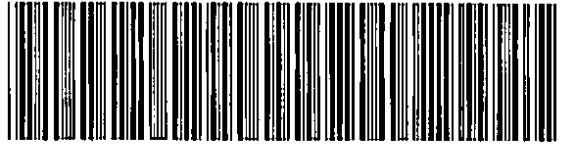
(Document Number)

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JUL 15 2020

FILED
CLERK OF STATE
20 SEP 15 AM 11:12

Amend/Name Change

SEP 21 2020

D CUSHING



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 27, 2020

DOUGLAS H. JENNINGS JR
7134 WESTMORELAND DR
SARASOTA, FL 34243

SUBJECT: GULF COAST CREMATIONS INC.
Ref. Number: P11000025215

We have received your document for GULF COAST CREMATIONS INC. and your check(s) totaling \$120.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file articles of amendment is \$35.00. There is a balance of \$5.00.

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) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 620A00016331

✓ # 3549 9.9.2020

Articles of Amendment
to
Articles of Incorporation
of

GULF COAST CREMATIONS INC.

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

P11000025215

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

GULF COAST CREMATIONS RETIRED INC.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

7134 WESTMORELAND DRIVE

SARASOTA, FL 34243

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

7134 WESTMORELAND DRIVE

SARASOTA, FL 34243

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 _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (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.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 SEP 15 AM 11:12

1)	_____ Change	_____	_____	_____
	_____ Add			_____
	_____ Remove			_____
2)	_____ Change	_____	_____	_____
	_____ Add			_____
	_____ Remove			_____
3)	_____ Change	_____	_____	_____
	_____ Add			_____
	_____ Remove			_____
4)	_____ Change	_____	_____	_____
	_____ Add			_____
	_____ Remove			_____
5)	_____ Change	_____	_____	_____
	_____ Add			_____
	_____ Remove			_____
6)	_____ Change	_____	_____	_____
	_____ Add			_____
	_____ Remove			_____

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

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

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

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)

JULY 03, 2020

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

JULY 03, 2020

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 incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☒ 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 statement 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 _____
(voting group)

JULY 10, 2020

Dated _____

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)

DOUGLAS H. JENNINGS, JR.

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)