P20 0000 30131

(Requestor's Name)	
(Address)	300346
(Address)	300340
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	09,425, 30+-1
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





095183

01014--025 •+85.00

Muchd

AUG 1 0 2020 IALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: RICHARD FUNERAL SERVICES INC DOCUMENT NUMBER: P20000030131 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LOIS RICHARD Name of Contact Person RICHARD FUNERAL SERVICES INC Firm/ Company 233 N 9TH STREET Address HAINESCITY, FL 33844 City/ State and Zip Code RICHARDFUNERALSERVICESINC@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (863) 353-1511
Area Code & Daytime Telephone Number LOIS RICHARD Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to **Articles of Incorporation** of

. . .

Check if applicable

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

of Corporation as curren	tly filed with the Florida De	pt. of State)		
P20000030131				
(Document Number	of Corporation (if known)			
.1006, Florida Statutes, thi	s Florida Profit Corporation	adopts the followin	g ameno	dment(s) t
ame of the corporation:				
			The	nere:
Corp," "Inc," or "Co".	A professional corporation	" or the abbreviation name must contain	m "Cor	p., "
				_
STREET ADDRESS)			20.	
			<u>.</u> .	
		<u> </u>	· .	
Enter new mailing address, if applicable:			ري: ات	•
<u>OFFICE BOX</u>)	<u></u>		-0	— ī·
			<u> </u>	
			1.2 -	_
			ŏ -	_
		ame of the		
w registered office addre	551			
LOIS RICHARD			_	
233 N 9TH STREET				
(Florida s	treet address)	<u> </u>	_	
HAINESCITY		Classida 33844		
	(City)		Code)	_
	•			
hanging Registered Ager	<u>nt:</u>	e.t		
tered agent Lam familiar	with and accept the obligation	ms of the position.		
Signature of New	Registered Agent, if changing		_	
	(Document Number 1,1006, Florida Statutes, this name of the corporation: In the word "corporation," Corp," "Inc," or "Co", " or the abbreviation "P.A. If applicable: STREET ADDRESS) Ilicable: OFFICE BOX) Indoor registered office addressed	(Document Number of Corporation (if known) 2,1006. Florida Statutes, this Florida Profit Corporation name of the corporation: In the word "corporation," "company," or "incorporated Corp," "Inc," or "Co". A professional corporation " or the abbreviation "P.A." if applicable: STREET ADDRESS	(Document Number of Corporation (if known) 2.1006, Florida Statutes, this Florida Profit Corporation adopts the following the corporation: In the word "corporation," "company," or "incorporated" or the abbreviation Corp, "Inc." or "Co". A professional corporation name must contain or the abbreviation "P.A." [If applicable: [STREET ADDRESS] [Icable: [OFFICE BOX] [Icable: [Icable: [OFFICE BOX] [Icable: [Icable: [OFFICE BOX] [Icable: Icable: [Icable: [Icable: [Icable: Icable: [Icable: Icable: [Icable: Icable: Icable: [Icable: Icable: I	(Document Number of Corporation (if known) 1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment of the corporation: The name of the abbreviation "Corporation name must contain the wastern of the abbreviation "P.A." If applicable: STREET ADDRESS Ilicable: OFFICE BOX) Ilicable: OFFICE BOX) Ilicable: OFFICE BOX Ind/or registered office address in Florida, enter the name of the wastern of the position.

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	SAMUEL RICHARD JR	233 N 9TH STREET
Add			HAINCITY ,FL 33844
X Remove			
2) Change	P	LOIS RICHARD	233 N 9TH STREET
XAdd			HAINES CITY,FL 33844
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

sttach additional sh	ing additional Art eets, if necessary).	(Be specific)				
					·- 	-
			<u></u> .			
			·-	-		
		_				
		<u> </u>				
		- -				
		<u> </u>	· · · · ·	_		<u> </u>

				<u> </u>		
					_	
						
					_	
	<u>_</u>					
an amendment pr	ovides for an evel	hange reclassific	ation or cancel	lation of issued	l shares.	
provisions for impl	lementing the ame	endment if not co	ntained in the a	mendment its	elf:	
(if not applicab	le, indicate N/A)					
				_		
						_
<u>-</u>						
						

.

	06/22/2020	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	5/22/2020	
Effective date <u>if applicable</u> :		 -
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendme sufficient for approval.	nt(s)
	approved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by 1		
· · · · · · · · · · · · · · · · · · ·	(voting group)	
06/22/20 Dated		
Signature <	Lois Richards	
(By a selec	director, president or other officer – if directors or officers have not beeted, by an incorporator – if in the hands of a receiver, trustee, or other equinted fiduciary by that fiduciary)	
	LOIS RICHARD	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

• •