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Requestor's Name 660 East J efferso	on Street				
Address Tallahassee, FL :	32310 222-1092	600	0002718 -12/22/98-1 *****35.00	136 —	5 -
City State Zi	p Phone		****35.00	*****35.0	0
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Florida Department of State, Jim Smith, Secretary of State

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

ursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, or	
a. The name of the corporation is: Orlando Funeral Home, Incorporated	
Date of incorporation February 9, 1996 Document number P96000013224	-
The name and address of the current registered agent and office:	
201 South Orlando Ave., Suite 365, Winter Park, Florida 32789	
The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM	
o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida 33324	
he street address of its registered agent and the street address of the business office f its registered agent as changed will be identical. uch change was authorized by resolution duly adopted by its board of directors or by nofficer so authorized by the board. Frank L. Matasavage, Secretary (Type or printed name and title)	_
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT. C T CORPORATION SYSTEM OF CORPORATION	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	
CR2E045 (7-91) Filing Fee: \$35.00	

(FLA. - 2194 - 3/4/92)