P97000056465

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ✓

Special Instructions to Filing Officer:

Office Use Only

1-17-10

200166979612

01/28/10--01019--002 **43.75

FILED
2010 FEB 16 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NC/Amend

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: La Funeraria Cubana, Inc.

DOCUMENT NUMBER: P97000056465

The enclosed ***Articles of Amendment*** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Zabida Hasin
Name of Contact Person

Funeraria Hialeah Memorial
Firm/ Company

198 Hialeah Drive
Address

Hialeah, Florida 33010
City/ State and Zip Code

zabihasin@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Zabida Hasin at (305 863 0444
Name of Contact Person — Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ $35 Filing Fee

☒ $43.75 Filing Fee & Certificate of Status

☐ $43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

☐ $52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

February 11, 2010

Zabida Hasin
198 Hialeah Drive
Hialeah, Florida 33010

Florida Department of State
Division of Corporations

Re: P9700056465

Attn: Ms Sylvia Gilbert

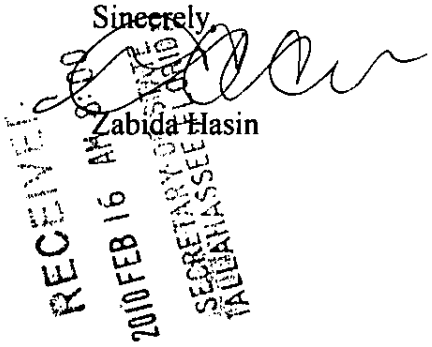
I am returning Letter Number: 910A00003227 as you requested to amend back as it was on August 31, 2009 re: letter number: 109A00029571.

Also note, I am the same person listed on: Funeraria Hialeah Memorial, LLC and Funeraria Hialeah Memorial, Inc. and La Funeraria Cubana, Inc.

Any questions please call: 305-863-0444

Sincerely,

Zabida Hasin



Articles of Amendment
to
Articles of Incorporation
of

FILED
2010 FEB 16 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

La Funeraria Cubana, Inc.

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

P97000056465

(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:

Funeraria Hialeah Memorial, 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)

198 Hialeah Drive
Hialeah, Florida
33010

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

198 Hialeah Drive
Hialeah, Florida
33010

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: Zabida Hasin

New Registered Office Address: 198 Hialeah Drive
(Florida street address)

Hialeah, Florida 33010
(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

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)

Title	Name	Address	Type of Action
Pstd	Alkhalifa, Sheik Rafaiy	151 NW 37 Ave. Miami, Fl. 33125	☐ Add ☒ Remove
Pstd	Zabida Hasin	198 Hialeah Drive Hialeah, Fl. 33010	☒ Add ☐ Remove
			☐ Add ☐ 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)

N/A

date of each amendment(s) adoption: 8/25/09

(date of adoption is required)

Effective date if applicable: _____

(no more than 90 days after 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 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)

☐ 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 8/25/09

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)

Zabida Hasin

(Typed or printed name of person signing)

President

(Title of person signing)