# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MGR

SIGNATURE: PAUL T. MAZZONI

Electronic Signature of Signing Authorized Person(s) Detail

	ΓΥ COMPANY ANN	
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DOCUMENT# L19000089290

Entity Name: SPACE COAST CREMATORY, LLC

Current Principal Place of Business:

1888 BALDWIN STREET A ROCKLEDGE, FL 32955

### **Current Mailing Address:**

1888 BALDWIN STREET A ROCKLEDGE, FL 32955 US

### FEI Number: 83-4327959

#### Name and Address of Current Registered Agent:

MAZZONI, PAUL T 1888 BALDWIN STREET A ROCKLEDGE, FL 32955 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE:

## Electronic Signature of Registered Agent

Authorized Person(s) Detail :					
Title	MGR	Title	MGR		
Name	MAZZONI, PAUL T	Name	MAZZONI, DILLON J.		
Address	1888 BALDWIN STREET, A	Address	1888 BALDWIN STREET, A		
City-State-Zip:	ROCKLEDGE FL 32955	City-State-Zip:	ROCKLEDGE FL 32955		
Title	MGR				
Name	MAZZONI, BLAKE				
Address	1184 SEDGEWOOD CIRCLE				
City-State-Zip:	MELBOURNE FL 32904				

Certificate of Status Desired: No

Jan 29, 2024 Secretary of State 3310297928CC

FILED

01/29/2024 Date

Date