

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000005025

Entity Name: NORTHSTAR FUNERAL SERVICES OF FLORIDA, LLC

Current Principal Place of Business:

1900 ST. JAMES PLACE
SUITE 300
HOUSTON, TX 77056

Current Mailing Address:

1900 ST. JAMES PLACE
SUITE 300
HOUSTON, TX 77056 US

FEI Number: 61-1479229

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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

Date

Authorized Person(s) Detail :

Title EXECUTIVE VICE PRESIDENT
Name BIRCH, TIMOTHY
Address 1900 ST. JAMES PLACE
SUITE 300
City-State-Zip: HOUSTON TX 77056

Title SVP
Name REICHERT, THOMAS
Address 1900 ST. JAMES PLACE
SUITE 300
City-State-Zip: HOUSTON TX 77056

Title VP OPS
Name JENKINS, DAVID
Address 1900 ST. JAMES PLACE
SUITE 300
City-State-Zip: HOUSTON TX 77056

Title VP
Name RENFRO, JOHN
Address 1900 ST. JAMES PLACE
SUITE 300
City-State-Zip: HOUSTON TX 77056

Title PRESIDENT
Name SULLIVAN, BRIAN
Address 1900 ST. JAMES PLACE
SUITE 300
City-State-Zip: HOUSTON TX 77056

Title COO
Name SULLIVAN, BRIAN
Address 1900 ST. JAMES PLACE
SUITE 300
City-State-Zip: HOUSTON TX 77056

Title MANAGER
Name NORTHSTAR FUNERAL GROUP, LLC
Address 1900 ST. JAMES PLACE
SUITE 300
City-State-Zip: HOUSTON TX 77056

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.

SIGNATURE: NORTHSTAR FUNERAL GROUP, LLC

MANAGER

03/29/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date