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OF STATE OF

DEC 13 2013 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Omni Elevator Co., Inc.
Name of Corporation DOCUMENT NUMBER: F10000000418
The enclosed Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Margaret B. Bess
Name of Contact Person
Omni Elevator Co., Inc.
Firm/Company
3722 Ashley Way
Address
Owings Mills, MD 21117
City/State and Zip Code
herlbe@aol.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Margaret B. Bess Name of Contact Person at (410) 363-4222 Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building Tallahassee, FL 32301

WI CE:CO AUT /CIO7 /71 /07



December 10, 2013

BESS, MARGARET

3722 ASHLEY WAY OWINGS MILLS, MD 21117

SUBJECT: OMNI ELEVATOR CO., INC.

Ref. Number: F10000000418

We have received your document for OMNI ELEVATOR CO., INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted the the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 913A00028114

Rebekah White Regulatory Specialist II

www.sunbiz.org

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F1000000418	3	
(Document nu	number of corporation (if known)	
1 Omni Elevator Co., Inc.		
(Name of corporation as it ap	opears on the records of the Department of State)	_
_{2.} Maryland	_{3.} 01/20/2010	
(Incorporated under laws of)	(Date authorized to do business in Florida)	
(4-7 complete o	SECTION II ONLY THE APPLICABLE CHANGES)	<u></u>
4. If the amendment changes the name of the corpo	oration, when was the change effected under the laws of	111
its jurisdiction of incorporation?		\supset
5	ORIA CO	
Omni Elevator Co., Inc. of Maryland (If new name is unavailable in Florida, enter alter business in Florida)	ernate corporate name adopted for the purpose of transacting	-
6. If the amendment changes the period of duration	n, indicate new period of duration.	
<u> </u>	(New duration)	
7. If the amendment changes the jurisdiction of inc	corporation, indicate new jurisdiction.	
	(New jurisdiction)	
 Attached is a certificate or document of similar if 90 days prior to delivery of the application to the having custody of corporate records in the jurisd 	import, evidencing the amendment, authenticated not more the Department of State, by the Secretary of State or other offic diction under the laws of which it is incorporated.	an ial
Mangaret B. Bess (Signature of a director, president or other officer of a receiver or other court appointed fiduciary, by	if in the hands	
Margaret B. Bess	President	
(Typed or printed name of person signing)	(Title of person signing)	

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: OMNI ELEVATO	
E4000000	(Name of Corporation)
DOCUMENT NUMBER: F10000000	J418
The enclosed Resolution of the Board of fee are submitted for filing.	Directors to Change the Alternate name for use in Florida and
Please return all correspondence concerning	ng this matter to the following:
BESS, MARGARET	
(Name of Contact Person)	
OMNI ELEVATOR CO	., INC.
(Firm/Company)	
3722 ASHLEY WAY	
(Address)	
OWINGS MILLS, MD 2	21117
(City/State and Zip Code))
For further information concerning this ma	atter, please call:
BESS, MARGARET	at (410)363-4222 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the F	lorida Department of State for the following amount:
\$35.00 Filing Fee Certificate of State	& S43.75 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

TO:

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT OMNI ELEVATOR CO., INC., INCORPORATED JANUARY 07, 1992, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS AUGUST 05, 2013.

Paul B. Anderson Charter Division



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

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