

F10000005539

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(Business Entity Name)

(Document Number)

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15 MAY 11 AM 10:06  
DIVISION OF REVENUE  
STATE OF CALIFORNIA

Cal.  
5-15-15

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ENAVATE Name Change  
Name of Corporation

**DOCUMENT NUMBER:** F0000005539

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Ellen Binns**

Name of Contact Person

**ENAVATE, Inc.**

Firm/Company

**7887 E Belleview Ave**

Address

**Englewood, CO 80111**

City/State and Zip Code

**acct@enavate.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Ellen Binns**

Name of Contact Person

at ( **303** ) **876-5120**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:



\$35.00 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

**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)**

F10000005539

(Document number of corporation (if known))

RECEIVED  
SECRETARY OF STATE  
15 MAY 11 AM 10:06

1. MBS DEV, INC.

(Name of corporation as it appears on the records of the Department of State)

2. Colorado

(Incorporated under laws of)

3. 12/17/2010

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 2/24/2015

5. ENAVATE, Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

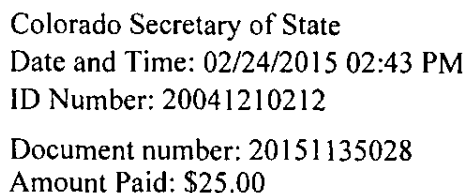
Clay Anderson  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Clay Anderson

(Typed or printed name of person signing)

Secretary, CFO

(Title of person signing)



Document must be filed electronically.  
Paper documents are not accepted.  
Fees & forms are subject to change.  
For more information or to print copies  
of filed documents, visit [www.sos.state.co.us](http://www.sos.state.co.us).

ABOVE SPACE FOR OFFICE USE ONLY

filed pursuant to §7-90-301, et seq. and §7-110-106 of the Colorado Revised Statutes (C.R.S.)

ID number: 20041210212

1. Entity name: MBS DEV, INC.  
(If changing the name of the corporation, indicate name before the name change)

2. New Entity name:  
(if applicable) **ENAVATE, Inc.**

3. Use of Restricted Words (if any of these terms are contained in an entity name, true name of an entity, trade name or trademark stated in this document, mark the applicable box):

- ☐ "bank" or "trust" or any derivative thereof  
☐ "credit union"      ☐ "savings and loan"  
☐ "insurance", "casualty", "mutual", or "surety"

4. Other amendments, if any, are attached.

5. If the amendment provides for an exchange, reclassification or cancellation of issued shares, the attachment states the provisions for implementing the amendment.

6. If the corporation's period of duration as amended is less than perpetual, state the date on which the period of duration expires:

(mm/dd/yyyy)

or

If the corporation's period of duration as amended is perpetual, mark this box: ☐

7. (Optional) Delayed effective date: \_\_\_\_\_  
(mm/dd/yyyy)

**Notice:**

Causing this document to be delivered to the secretary of state for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the secretary of state, whether or not such individual is named in the document as one who has caused it to be delivered.

8. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:

Anderson Clay  
(Last) (First) (Middle) (Suffix)  
7887 E. Belleview Ave.  
(Street name and number or Post Office information)  
Suite 600  
Englewood CO 80111  
(City) (State) (Postal/Zip Code)  
United States  
(Province - if applicable) (Country - if not US)

(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box ☐ and include an attachment stating the name and address of such individuals.)

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