# 111000131517

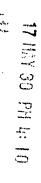
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# **COVER LETTER**

		tion Secti of Corpo			•				
eun ir c		Residential Elevators, LLC							
SUBJEC	,1; <u> </u>		Name of Limi	ted Liability Company	<del></del>				
The enclo	osed Arti	cles of An	nendment and fee(s) are subr	mitted for filing.					
Please re	turn all c	orrespond	ence concerning this matter t	o the following:					
			Elise Gross, Esq.						
	lease return all correspondence concerning this matter to the following:  Elise Gross, Esq.  Name of Person  The Presser Law Firm, P.A.  Firm/Company  6199 N. Federal Highway  Address  Boca Raton, FL 33487  City/State and Zip Code eg@assetprotectioanttorneys.com  E-mail address: (to be used for future annual report notification)								
		The Presser Law Firm, P.A.							
				Firm/Company					
	6199 N. Federal Highway								
		Address							
			Boca Raton, FL 33487						
	City/State and Zip Code								
		_							
			E-mail address: (t	o be used for future annual report	notification)				
For furth	er inform	ation con	cerning this matter, please ca	11:					
Elise Gro		_		at ()					
		Name of Po	erson	Area Code Da	ytime Telephone Number				
Enclosed	l is a chec	k for the f	following amount:		;				
\$25.6	00 Filing	Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	· \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Residential Elevators, LLC	
( <u>Name of the Limited Liability Company as it no</u> (A Florida Limited Liability Co	w appears on our records.) oupany)
The Articles of Organization for this Limited Liability Company were file	d on 11/18/2011 and assigned
Florida document number L11000131517	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
	1
The new name must be distinguishable and contain the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
<del></del>	
B. If amending the registered agent and/or registered office add	lress on our records, enter the name of the new
registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	. Florida
City	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager. AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
President	Eric M. Sharkey	2910 Kerry Forest Pkwy, D4-1	□ Add
		Tallahassee, FL 32309	<b>■</b> Remove
			☐ Change
President	Erin Ennis	2910 Kerry Forest Pkwy, D4-1	<b>⊟</b> Add
		Tallahassee, FL 32309	- □ <b>Re</b> move
			□ Change
<u>.</u>			□ Add (
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ctive date, if other than the date of filing:	(	optional)
effective date is listed, the date must be specific and cannot be prior c: If the date inserted in this block does not meet the applic	cable statutory filing requirements	after filing.) Pursuant to 605.02, this date will not be listed
ument's effective date on the Department of State's records	,	
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record specifies a delayed effective date, but no ne 90th day after the record is filed.	ot an effective time, at 12:0	JI a.m. on the earlier
ed New 15, 2017	<del></del> · /	
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00