

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Elp/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
5/5/21 Tm

Office Use Only



900361959169

03/16/21--01030--015 **55.00

21 MAR 15 PH 4: 12



WWW.HED.DESIGN

Boston

Chicago

Dallas

Detroit

Los Angeles

Sacramento

San Diego

San Francisco

26913 Northwestern Hwy

Suite 200

Southfield MI 48033

T 248.262 1500

F 248 262 1515

March 9, 2021

Florida Department of State

Division of Corporations - Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Subject: Articles of Amendment to Articles of Organization of

Harley Ellis, LLC L20000218606

Dear Sir/Madam:

Enclosed please find the Articles of Amendment to Articles of Organization of Harley Ellis, LLC, Registration No. L20000218606.

Enclosed also please find a \$55.00 check made payable to the Florida Department of State for the Filing Fee plus a Certified Copy.

Please feel free to contact me with any questions.

My return address: 26913 Northwestern Hwy, Ste 200, Southfield, MI

48033; My daytime phone: 248.262.1828.

Maria L. Meldrum

L'egal Counsel

COVER LETTER

ŤΟ:	Registration Se Division of Co								
CHDIC	4-4-3	ELLIS, LLC							
SUBJE	Name of Limited Liability Company								
The enc	losed Articles of	Amendment and fee(s) are subn	nitted for filing.						
Please re	eturn all correspo	ondence concerning this matter to	o the following:						
		MARIA L MELDRUM							
			Name of Person						
		HARLEY ELLIS DEVERE	AUX CORPORATION						
			Firm/Company						
		26913 NORTHWESTERN	HWY. STE 200						
			Address	 					
		SOUTHFIELD, MI 48033							
			City/State and Zip Code						
		mmeldrum@hed.design							
		E-mail address: (to	be used for future annual repor	t notification)					
For furth	her information o	concerning this matter, please cal	1:						
Maria L	. Meldrum		248 262-183	28					
	Name c	of Person	at () Area Code Da	nytime Telephone Number					
Enclosed	d is a check for t	he following amount:							
	.00 Filing Fee	□ \$30.00 Filing Fee &	■ \$55.00 Eiling Eap &	☐ \$60.00 Filing Fee.					
U 323	.oo i miig i cc	Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &					
	Mailing Address Registration		<u>Street Addres</u> Registration						
	Division of C			Corporations					
P.O. Box 6327			The Centre of Tallahassee						

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION AND CONTRACTOR OF CONTRACTOR **OF**

21 MAR 16 PH 4: 12

HARLEY ELLIS, LLC

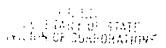
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document number <u>L20000218606</u>	were filed on JULY	23, 2020 and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liah	ility company here	:			
The new name must be distinguishable and contain the words "Limited Liabi	hty Company," the design	gnation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)					
Enter new mailing address, if applicable:	26913 Northwester	n Hwy			
(Mailing address MAY BE A POST OFFICE BOX)	Ste 200				
	Southfield MI 48033				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our reco	ords, enter the name of the new registered			
New Registered Office Address:	Enter Florida	struct address			
	Enter Florida street address				
	City	, Florida Zip Code			
New Registered Agent's Signature, if changing Registered Agent:	•	,			
I hereby accept the appointment as registered agent and agr		pacity. 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 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>	Address 21 MAR 15 PM 4: 1	Fype of Action
MGR	Eric Speenburgh	133 Federal St, Floor 5, Boston, MA 02110	_ ≘ Add
			_ □Remove
			_ □Change
MGR	Chad Fowler	6303 Blue Lagoon Ave, Ste 310, Miami, FL 33126	_ ≡ Add
			_ □Remove
			_ □Change
MGR	James Corsiglia	26913 Northwestern Hwy, Ste 200, Southfield, MI 48	0 ∄≣Add
			_ □Remove
			_ Change
MGR	Arthur Smith		_ □Add
		6303 Blue Lagoon Ave, Ste 310, Miami, FL 33126	_ ≡ Remove
			_ □Change
			_ 🗆 Add
			_ □Remove
			_ □Change
			_ 🗆 Add
			_ □Remove
			_ 🗆 Change

If amending any othe							of the State of the		AH Airoh	
						21 M	AR 15	PH 4	:12	
					• • •					
						.	 -			
		_								
		·								
 										
					<u>.</u>					
										
					<u></u>					
										
Effective date, if other If an effective date is listed, Note: If the date inserte document's effective date	the date must be spe ed in this block do	of filing: _ cific and car es not mee	t the applic	to date of fi able statut		an 90 days		g.) Pursu		
e record specifies a delay rd is filed.	ved effective date.	but not an	effective ti	me, at 12:0)1 a.m. on th	e earlier o	f: (b) T	he 90th	day after	the
March 8	1		2021							
. (1////	7		<u> </u>						
	Signati	re of a men	iber or autho	rized repre	sentative of a	nember				
	drum, Legal Cour				 					

Typed or printed name of signee