

M15000004884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

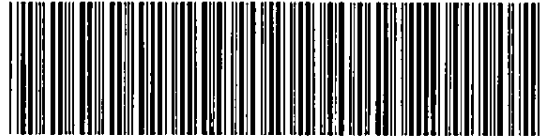
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/08/23--01016--016 \*\*80.00

CLERK OF STATE  
TALLAHASSEE, FLORIDA

2023 SEP -8 PM12:40

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RES System 3, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kim Hedges

Name of Person

RES System 3, LLC

Firm/Company

1601 19th Street # 400

Address

Denver, CO 80202

City/State and Zip Code

kim.hedges@res-group.com

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

For further information concerning this matter, please call:

Kim Vitulli

Name of Person

at ( 845 ) 507-2201

Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☒ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

CR2E055 (9/15)

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: RES System 3, LLC

Enter new principal office address, if applicable: \_\_\_\_\_

(Principal office address

MUST BE A STREET ADDRESS)

1601 19th Street, Suite 400

Denver, CO 80202

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address

MAY BE A POST OFFICE BOX)

Same as above

2. The Florida document number of this limited liability company is: M15000004884

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 06/22/2015

## SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: \_\_\_\_\_  
(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address 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

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 TALLAHASSEE, FLORIDA

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>President</u>	<u>Kyle Settle</u>	<u>1601 19th Street, Suite 400</u>	<input type="checkbox"/> Add
		<u>Denver, CO 80202</u>	<input checked="" type="checkbox"/> Remove
<u>VP</u>	<u>Peter J. Leineke</u>	<u>1601 19th Street, Suite 400</u>	<input type="checkbox"/> Add
		<u>Denver, CO 80202</u>	<input checked="" type="checkbox"/> Remove
<u>                    </u>	<u>                    </u>	<u>                    </u>	<input type="checkbox"/> Add
<u>                    </u>	<u>                    </u>	<u>                    </u>	<input type="checkbox"/> Remove
<u>                    </u>	<u>                    </u>	<u>                    </u>	<input type="checkbox"/> Add
<u>                    </u>	<u>                    </u>	<u>                    </u>	<input type="checkbox"/> Remove
<u>                    </u>	<u>                    </u>	<u>                    </u>	<input type="checkbox"/> Add
<u>                    </u>	<u>                    </u>	<u>                    </u>	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

DocuSigned by:  
Brian Schnall  
 Signature of the authorized representative  
Brian Schnall  
 Typed or printed name of signee

Filing Fee: \$25.00

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 TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RES SYSTEM 3, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



5747342 8300

SR# 20233215576

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203936686

Date: 08-10-23