MTD00002430

(Re	questor's Name)	
V	,	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(5)	ocument Number)	
(00	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE

D. SCOTT FEB 1 6 2018



February 2, 2018

JENNIER SMITH 6547 N AVONDALE CHICAGO, IL 60631

SUBJECT: RIDGE MANOR MHC LLC

Ref. Number: M17000002430

We have received your document for RIDGE MANOR MHC LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FL LLC, but your entity is a Foreign LLC. Please complete and return the enclosed blank form(s).

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

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 718A000 2249

RECEIVED FEB 1 4 2018

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Ridge Manor MHC LA	d Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are sub-	nitted for filing.
Please return all correspondence concerning this matter	to the following:
Jennifer Smith Name of Person	
Ridge Manor MHC LLC Firm/Company	
(0547 N. Avondale Address	
Chicago, IL 60631 City/State and Zip Code	
E-mail address: (to be used for future annual report i	notification)
For further information concerning this matter, please of	all:
Tennifer Snith at (7) Name of Person Are	a Code & Daytime Telephone Number 7
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: 70 A Registration Section Division of Corporation P.O. Box 6327 Tallahassee, Florida 32314
_	55 Filing Fee &

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 appear	s on the records of the Florida Depar	rtment of
State: Ridge Manor MHC L	<u> </u>	
Enter new principal office address, if applicable:	MA	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A.	
2. The Florida document number of this limited lia	ability company is: MITOOOOC	72430
3. Jurisdiction of its organization: Thino	ùs	J
4. Date authorized to do business in Florida:		
SECTION II (5-9 complete only the applicable	changes)	T FEB
5. New name of the limited liability company: (mus	et contain "Limited Liability Compar	NY, ""L.L.E. Cor "H.C.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.C	naging members adopting the alterna	ness in Florida and attach a atte name. Exemple: The attendance are the attendance are the attendance at the attendance attendance at the attendance attendance at the attenda
6. If amending the registered agent and/or registered registered agent and/or the new registered office and		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Sv	want Addrawa
_	City	, Florida <u>Zip Code</u>
New Registered Agent's Signature, if changing Rel I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this capacity, and complete performance of my di tered agent as provided for in Chapt in the registered office address, I ho	uties, and I am familiar with ter 605, F.S. Or, if this

If Changing Registered Agent, Signature of New Registered Agent

3. If the ameno	lment changes person, title or capacity in a	secordance with 605.0902 (1)(e), indicate	that change:
itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
16R	Leslie Taylor-Rharbi	3802 Ehrlich Rd., #102 NAdd	
		Tampa FL 33624	Remov
PRES	Edward Teman	6547 N. Avondale	Add
		Chicago, TL 60631	□ Remove
(Eo	Jeffrey Fannon	6547 N. Arondale	Add
		Chicago, II 60631	Remove
CFO Mark Connolly	6647N. Avondale	Add	
	Chicago, IZ 6063	[Remove	
			SECRET FEB
aforementic	a certificate, if required: no more than 90 med amendment(s), duly authenticated by under the law of which this entity is organized as a signature of the law of the	y the official having custody of records in inized.	Remove

Filing Fee: \$25.00