

M23 00004011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

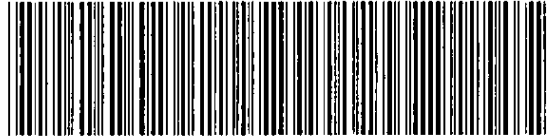
(Business Entity Name)

(Document Number)

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

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Motion Elevator, 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:

Ed Stachowiak

\_\_\_\_\_  
Name of Person

Axxiom Elevator, LLC

\_\_\_\_\_  
Firm/Company

7378 W Atlantic Blvd, Suite 138

\_\_\_\_\_  
Address

Margate, FL 33063-4214

\_\_\_\_\_  
City/State and Zip Code

ed.stachowiak@axxiomelevator.com

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

For further information concerning this matter, please call:

Ed Stachowiak

\_\_\_\_\_  
Name of Person

at ( 954 ) 526-7512

\_\_\_\_\_  
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

**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: Motion Elevator, LLC

Enter new principal office address, if applicable: 5915 Park Drive

(Principal office address  
MUST BE A STREET ADDRESS)

Margate, FL 33063

Enter new mailing address, if applicable:

(Mailing address  
MAY BE A POST OFFICE BOX)

5915 Park Drive

Margate, FL 33063

2. The Florida document number of this limited liability company is: M23000004011

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 3/24/2023

**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: Richard P. Hermann, II, Esq. Shapiro, Blasi, Wasserman & Hermann, P.A.

New Registered Office Address: 7777 Glades Rd, Suite 400

Enter Florida Street Address

Boca Raton

Florida 33434

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


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)(e), indicate that change:

Adding new agents to the company

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
COO	Ed Stachowiak	5915 Park Drive	<input checked="" type="checkbox"/> Add
		Margate, FL 33063	<input type="checkbox"/> Remove
CFO	Rick Morris	5915 Park Drive	<input checked="" type="checkbox"/> Add
		Margate, FL 33063	<input type="checkbox"/> Remove
CEO	Jeremy Metzger	5915 Park Drive	<input checked="" type="checkbox"/> Add
		Margate, FL 33063	<input type="checkbox"/> Remove
MBR	Amanda Contreras	5915 Park Drive	<input checked="" type="checkbox"/> Add
		Margate, FL 33063	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<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.

  
Signature of the authorized representative

Ed Stachowiak

Typed or printed name of signee

Filing Fee: \$25.00

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)(e), indicate that change:

Removing retired agents from the company

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MBR	Joe Portelli	1113 NW 65TH AVENUE,	<input type="checkbox"/> Add
		MARGATE, FL 33063	<input checked="" type="checkbox"/> Remove
MBR	Rose Portelli	1113 NW 65TH AVENUE,	<input type="checkbox"/> Add
		MARGATE, FL 33063	<input checked="" type="checkbox"/> Remove
AP	Joe Portelli	1113 NW 65TH AVENUE,	<input type="checkbox"/> Add
		MARGATE, FL 33063	<input checked="" type="checkbox"/> Remove
AP	Rose Portelli	1113 NW 65TH AVENUE,	<input type="checkbox"/> Add
		MARGATE, FL 33063	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<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.



Signature of the authorized representative

Ed Stachowiak

Typed or printed name of signee

Filing Fee: \$25.00