M3400003074

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext:

Date: 05/29/24 Order #: 1518724-1

Re: Haworth-Meyer-Boleyn Professional Engineers, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount, to be deducted from our State Account: \$25.0 - FL State Account Number:

1200000000195, Service AUTH/A

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section Division of Corporations HAWORTH-MEYER-BOLEYN PROFESSIONAL ENGINEERS, LLC SUBJECT: 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: KAITY FRANK Name of Person TRILON GROUP Firm/Company 1200 17TH ST. SUITE 860 Address DENVER, CO 80202 City/State and Zip Code REGISTRATION@TRILONGROUP.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KAITY FRANK Area Code & Daytime Telephone Number Name of Person **Mailing Address:** Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303 Enclosed is a check for the following amount: **■\$25** Filing Fee ☐ \$30 Filing Fee & ☐ \$55 Filing Fee & □ \$60 Filing Fee. Certificate of Status Certified Copy Certificate of Status &

Certified Copy

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

SECTION	VI (1-4 must be completed)	45
Name of limited liability Company as it appear	s on the records of the Florida Department of	3 (C)
State: HAWORTH-MEYER-BOLEYN PROFES	SSIONAL ENGINEERS. LLC	12/2
Enter new principal office address, if applicable:	N/A	17 Co
(<u>Principal office address</u> MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (<u>Mailing address</u> MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited lia	ability company is: M24000003074	
3. Jurisdiction of its organization: KENTUCKY		
4. Date authorized to do business in Florida: $\frac{3/11}{1}$	/2024	
SECTION II (5-9 complete only the applicable	changes)	
5. New name of the limited liability company: New name of the limited liability company (must be a liability liabil	/A t contain "Limited Liability Company. " "L.L.C" or "LLC.")	
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mamust contain "Limited Liability Company." "L.L.C	I for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate name. "L.L.C.")	ne
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac	ed officer address on our records, enter the name of the new ddress here:	
Name of New Registered Agent: N/A		
New Registered Office Address:		
	Enter Florida Street Address	
	Florida	

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

Thereby 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.

City

Zip Code

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
Title/ Capacity	<u>Name</u>	<u>Address</u> <u>Ty</u>	pe of Action		
CEO	ROBERT DOWLER	3 HMB CIR. FRANKFORT, KY 40601	_ = Add		
			_ □Remo		
ΛP	MITCH GREEN	3 HMB CIR. FRANKFORT, KY 40601	_ = Add		
			□Remo		
AP	CHARUL DOSHI	1200 17TH ST. #860 DENVER, CO 80202	_ = Add		
			_ □Remo		
/P	MICHAEL RENSHAW	1200 17TH ST. #860 DENVER CO 80202	_ ≡ Add		
			_ □Remo		
VP	CHRISTOPHER STEWART	3 HMB CIR. FRANKFORT, KY 40601	_ = Add		
aforemention	under the law of which this entity is o	by the official having custody of records in the	_ □Remov		

Filing Fee: \$25.00

Exhibit A

Schedule of Officers

Robert Dowler President & CEO

Julia Stutz Secretary
Charul Doshi Treasurer
Michael Renshaw Vice President
Christopher Stewart Vice President
Mitch Green Authorized Person