## P04000127020

| (Re                     | questor's Name)    |                  |
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| (Cit                    | cy/State/Zip/Phone | <del>• #</del> ) |
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| PICK-UP                 | ☐ WAIT             | MAIL             |
|                         |                    |                  |
| (Bu                     | siness Entity Nan  | ne)              |
|                         |                    |                  |
| (Do                     | cument Number)     |                  |
| Certified Copies        | _ Certificates     | of Status        |
| Certified Copies        |                    | . o. o           |
|                         | Filian Officer     |                  |
| Special Instructions to | Filing Officer:    |                  |
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Amend

Office Use Only

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## **COVER LETTER**

TO: Amendment Section Sivision of Corporations

| NAME OF CORPORATION:   | - NOUR ELEVATORS INC   |
|--|--|
| DOCUMENT NUMBER: PO 400  | 0/27020  |
| The enclosed Articles of Amendment and fee are   | submitted for filing.  |
| Please return all correspondence concerning this n   | natter to the following:   |
| Jin Ridero<br>(Name of C   | Contact Person)  |
| R. d. N-OUN E  | Company)   |
| 9 = 1200 Ne 48 = (Ac   | 57 S74 / idress)   |
| Pempare Beach (City/State) Tor further information concerning this matter, ple                 | And Zip Code)  |
| conferming this matter, pre  | ase can.   |
| (Name of Contact Person)   | at ( 95 Y ) 650 812 C<br>(Area Code & Daytime Telephone Number)  |
| Enclosed is a check for the following amount:  |  |
| ☐ \$35 Filing Fee & Certificate of Status  | □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399   |



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 24, 2005

Jim Ridenour Ride-N-Our Elevator Inc 1200 NE 48 St., Ste. 1 Pompano Beach, FL 33064

SUBJECT: RIDE-N-OUR ELEVATOR INC

Ref. Number: P04000127020

We have received your document for RIDE-N-OUR ELEVATOR INC. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Letter Number: 405A00037429

Susan Payne Senior Section Administrator

## Articles of Amendment to Articles of Incorporation of

| RIDE-N-OUR ELEVATOR INC  |
|--|
| (Name of corporation as currently filed with the Florida Dept. of State)   |
|  |
| P04000127020   |
| (Document number of corporation (if known)   |
| (Bootanon number of corporation (it may wi)  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation  |
| adopts the following amendment(s) to its Articles of Incorporation:  |
|  |
| NEW CORPORATE NAME (if changing):  |
| ALTER AND  |
| <b>y</b>   |
| (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")   |
| (A protessional corporation must contain the word character; protessional association, or the aboreviation 1.21.)  |
| AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s)  |
| and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)   |
|  |
| VIII NEW OFFICER - VICE PRISIDENT  |
|  |
| Mara sa L. Rossela   |
| 12903 LAKE TRUE LN   |
|  |
| Hudson Fl 3\$ 669 as of 5/10   |
| VIIIT Distribusion of Shans  |
|  |
| Norma L Rossin et 12503 Lake   |
| Tren 2- Hucker Flay669 shall necreve   |
|  |
| 10 Sharw 10%" of Ride-H- au Elevaron   |
|  |
| Inc 5/1/05   |
| (Attach additional pages if necessary)   |
| If an amount many idea for any house and a signation and a substitute of its and all the same in the signature of its and a substitute of its and a su |
| If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)   |
| in implementing the amendment is not contained in the amendment user. (If not applicable, indicate NA)   |
|  |
|  |
|  |
|  |

(continued)

| The date of each amendment(s) adoption: 5/1/05   |
|--|
| Effective date if applicable: (no more than 90 days after amendment file date)   |
| (no more man 90 days after antendified the date)   |
| Adoption of Amendment(s) (CHECK ONE)   |
| The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.  |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes cast for the amendment(s) was/were sufficient for approval by   |
| (voting group)   |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |
| Signed this  |
| Tin Riderou  (Typed or printed name of person signing)  President  |
| (Title of person signing)  |

FILING FEE: \$35