PII 000 104685

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FILED 2021 MAR -4 PHI2: 41

MAY 14 2021 A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:	REI Holding Company			
DOCUMENT NUM	IBER:	P11000104685			
	s of Amendment and fee are sub	bmitted for filing.			
Please return all corr	espondence concerning this mat	tter to the following:			
	Karen Parker				
	Name of Contact Person				
Residential Elevators, LLC Firm/ Company					
Address					
Tallahassee, FL 32309					
	City/ State and Zip Code				
	licensing@residentialelevator	s.com			
	E-mail address: (to be us	ed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
Karen Parker		at (850	906-3054 x 280		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check t	or the following amount made p	payable to the Florida Dep	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314		Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 essee, FL 32303		

Articles of Amendment

to

FII

	of 2021.	LILED	
	REI Holding Company	TILED MAR-4 PH 12:41	
/Nama of t	Corporation as currently filed with the Fl		·
(Name of v	P11000104685	orida Dept. of State)	
	(Document Number of Corporation (if kr	Noum)	
	(Document Number of Corporation (if ki	iown)	
ursuant to the provisions of section 607.10 s Articles of Incorporation:	106, Florida Statutes, this <i>Florida Profit Cor</i>	<i>poration</i> adopts the fo	llowing amendment(s)
. If amending name, enter the new nam	e of the corporation:		
			The new
	ne word "corporation," "company," or "inco rp," "Inc," or "Co". A professional corp r the abbreviation "P.A."		
Enter new principal office address, if a Principal office address MUST BE A STR			
. 33	·		
. Enter new mailing address, if applica			_
(Mailing address <u>MAY BE A POST OF</u>	FFICE BOX)		
	or registered office address in Florida, en	ter the name of the	
). If amending the registered agent and/ new registered agent and/or the new r		ter the name of the	
		ter the name of the	
new registered agent and/or the new r	registered office address:		
new registered agent and/or the new r	Cogency Global Inc.		
new registered agent and/or the new r	Cogency Global Inc. 115 North Calhoun Street, Suite 4		32301

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Erin Ennis	2910 Kerry Forest Parkway
Add			Tallahassee, FL 32309
XX Remove			
2) Change	PTSD	Demory S. Boeneke	2958 Wellington Circle
XX Add			Tallahassee, FL 32309
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

١	amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific)
_	
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_	
_	
ſ	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
I	orovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
_	
_	
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_	

	ent(s) adoption:	, if other than the
date this document was sign	ned.	
Effective date <u>if applicabl</u>	e: (no more than 90 days after amendment file	e date)
	in this block does not meet the applicable statutory filing required the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/action was not required.	were adopted by the incorporators, or board of directors without si	hareholder action and shareholder
	were adopted by the shareholders. The number of votes cast for the state of the sufficient for approval.	he amendment(s)
	were approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amen	
"The number of ve	otes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated	February 12, 2021	
Signature	2 Dund Stande	
	(By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	
	Demory S. Boeneke	
	(Typed or printed name of person signing)	
	President/Treasurer/Secretary/Director	

(Title of person signing)