P98000051670

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119/13

COVER LETTER

TO; Amendment Section Division of Corporations

NAME OF CORPORA	TION: ACORN	STAIRLIE	TS, INC.
DOCUMENT NUMBE	r:	0051670)
The enclosed Articles of	Amendment and fee are su	abmitted for filing.	
Please return all correspo	ondence concerning this ma	itter to the following:	
	73 0	Name of Contact Person CORN STAIR Firm/ Company 35 LAKE F Address RLANDO, F City/ State and Zip Cod	ELLENOR DR
For further information c	E-mail address: (to be us		notification)*
			7) 650-0216 X1403 de & Daytime Telephone Number
Enclosed is a check for the	he following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ameno Divisio P.O. B	In Address Iment Section on of Corporations ox 6327 assee, FL 32314	Ameno Dívisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

	of	- DM (2)	n ?
Acorn	STAIRLIFT	- 2117 NOA 15 bu 15:	UE
(Name of Corporation as currently	y filed with the Florida Dept	of State)	\ 1 '
P9800	0051670	TALLAHASSEE. FLO	
(Document Number	of Corporation (if known)	70	
Pursuant to the provisions of section 607,1006, Florts Articles of Incorporation:	rida Statutes, this <i>Florida Pro</i>	fit Corporation adopts the follo	wing amendment(s)
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the m "Corp.," "Inc.," or Co.," or the designation "Co word "chartered." "professional association," or t	orp," "Inc," or "Co". A pre		
3. Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>			
			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		
			
 If amending the registered agent and/or registered agent and/or the new register 		ida, enter the name of the	
Name of New Registered Agent			
· · ·			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code	,
New Registered Agent's Signature, if changing F	Registered Agent:		
hereby accept the appointment as registered agen	t. I am familiar with and acc	ept the obligations of the positi	on.
Signature of	New Registered Agent if che	inging	

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:	е, ана эшпу этип	, Sr as an Aua.	
X Change	PT John I	<u>Ooe</u>	
X Remove	<u>V</u> <u>Mike</u> .	lones	: !
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>M</u> _	DONALD SHAPIRO	7335 LAKE ELLENOR DR
Add			ORLANDO, FL 32809
X Remove			
2) Change	<u> </u>	SHAWN HERBST	7335 LAKE FLLENOR DR
Add			ORLANDO, FL 32809
Remove	\	1400	
3) Change		TIMOTHY Mc COOL	7335 LAKE ELLENOR DR
Remove			ORLANDO, FL 32809
		- 0	
4) Change PTS	2 1) co o	JIM BRADLEY	7335 LAKE ELLENOR DR
Add Remove			ORLANDO, FL 32809
Kentove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
,	

The date of each amendment(s) adopt	lion: MARCH & D. 2015	, if other than the
date this document was signed.		
Effective date if applicable:	MARCH 25, 2013	
-	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.	
The amendment(s) was/were approv must be separately provided for each	ed by the shareholders through voting groups. The following statement th 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 adopte action was not required.	d by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder	
Dated 1161	3	
Signature		
(By a fire	for, provident or other officer - if directors or officers have not been	
	y an incorporator – if in the hands of a receiver, trustee, or other court induciary by that fiduciary)	
ардишеа	inductary by that inductary)	
	JIM BRADLEY	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	