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, <u>, , , , , , , , , , , , , , , , , , </u>	- M
(Requestor	s Name)
(Address)	
(Address)	- ···
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Business E	Entity Name)
(Document	Number)
Certified Copies C	ertificates of Status
·	
Special Instructions to Filing Of	fficer:

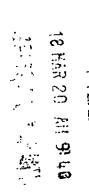




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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:	Behringer Corp	oration
	Name of Co	
DOCUMENT NUMB	ER:F140	000003820
The enclosed Statemer	nt of Change of Registered Office	/Agent and fee are submitted for filing.
Please return all corres	pondence concerning this matter	to the following:
	Jourdan C	Cerrillo —
<del></del>	Name of Con	tact Person
	DoMyLLC.c	com, LLC
	Firm/Cor	mpany
	5716 Corsa Ave	e. · Suite 110
	Addre	ess
	Westlake Village,	CA 91362-7354
	City/State and	
	compliance@d	omvllc.com v
E-1	nail address: (to be used for fu	iture annual report notification)
For further information	n concerning this matter, please ca	all:
Jourdan Cerrillo or	behalf of DoMyLLC.com, LLC	at ( <u>818</u> ) <u>264-4266</u> Area Code & Daytime Telephone Numbe
Name o	of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35,00 e	heck made payable to the Departi	ment of State.
	Mailing Address: Amendment Section	Street Address:
	Amendment Section Division of Corporations	Amendment Section Division of Corporations
	P.O. Box 6327	Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chan	ge is submitted for a c	orporation o <mark>rganiz</mark> ed	07.1508, or 617.1508, Florid I under the laws of the State of I agent, or both, in the State o	of New Jerse	<u>:y</u>	
1. The name of th	e corporation: Behring	ger Corporation				
2. The principal of	office address: 17 Rid	ge Road Branchvil				
3. The mailing ac						<u> </u>
4. Date of incorp	incorporation/qualification: 09/10/2014 Document number:			F14000003820		
5. The name and	street address of the cument of State: (If resign	rrent registered agen ned, enter resigned)	t and registered office on file			
-	CORP	ORATION SERVIC	CE COMPANY			
-		1201 HAYS STE	REET			
	TAL	LAHASSEE, FL 3	2301-2525			
6. The name and (if changed):	street address of the ne	ew registered agent (i	f changed) and /or registered	office	18 HAR 2	<u>-n</u>
		InCorp Services,	Inc.		Ö	
		17888 67th Court	: North	. 43	2	
	P.O. Box NOT acceptable					
		Loxahatchee, FL	33470			
			iress of the business office o		agent,	
Such change wa authorized by th	s authorized by resolute board, by the corpora	tion duly adopted by ation has been notific	its board of directors or by a ed in writing of the change.	an officer so		
V e	5/10/2		ed Hinds, President	d'talla		
I hereby accept I further agree t performance of	o comply with the prov	visions of all statutes <del>miliur-</del> with and acce led merely to reflect	Printed or typed name and gree to act in this capacity. It relative to the proper and coupt the obligation of my posite a change in the registered of riting of this change.	complete tion as register	ed	
-	March 16, 2018					
_	nature of Registered Agent		Date			
It signing on bel	nalf of an entity:					
	Pickett on behalf of Ir	Corp Services, Inc	C.			
',	ped or Printed Name	* * CII INC CEF.	C15			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)