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(Address)

(Address)

(City/State/Zip/Phone #)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BEN SERVICES, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GLADYS PORRAS DE HERNANDEZ  
(Name of Person)

Ben Services, LLC  
(Firm/Company)

1010 E 49th ST  
(Address)

HIALEAH, FLORIDA 33013  
(City/State and Zip Code)

For further information concerning this matter, please call:

Gladys Hernandez at ( 305 ) 685-3746  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

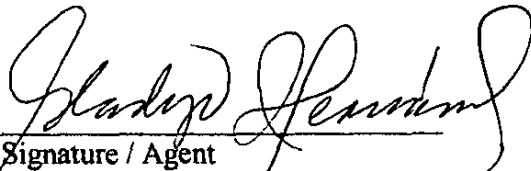


**ARTICLE VI**  
**REGISTERED AGENT**

**FILE AS FOLLOW:**

GLADYS PORRAS DE HERNANDEZ  
1010 E 49<sup>th</sup> ST  
HIALEAH, FL 33013

Having been named as registered agent and to accept services of process for the above stated LLC, at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
Signature / Agent  
GLADYS PORRAS DE HERNANDEZ

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