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PICK-UP WAIT MAIL	
(Business Entity Name)	_
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COVER LETTER

Division of Corporations	
SUBJECT: BERVENZ CO., L	nited Liability Company)
(Name of Em	nice Electricy Company)
	ability Company for Authorization to Transact Business in ubmitted to register the above referenced foreign limited
Please return all correspondence concerning this r	matter to the following:
ANTHONY A	m160
(N	ame of Person)
BERUENZ CL	IMPANY, LLC
(Fi	rm/Company)
5229 LARI	(LANE
	(Address)
AUEXANDI	RIA, LA 71303
	tate and Zip Code)
For further information concerning this matter, ple	ease call:
ANTHORN AMIGO	at (318) 359-2727
(Name of Person)	at (318) 359 - 2727 (Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sum \frac{1}{2}\$125.00 Filing Fee \$\sum \frac{1}{2}\$130.00 Filing Fee \$\sum \text{Certificate of the following amount:}\$	



FLORIDA DEPARTMENT OF STATE Division of Corporations

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 27, 2007

ANTHONY AMIGO 5229 LARK LN ALEXANDRIA, LA 71303

SUBJECT: BERLENZ COMPANY, LLC

Ref. Number: W07000057734

We have received your document for BERLENZ COMPANY, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1,050.00.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 907A00067381

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

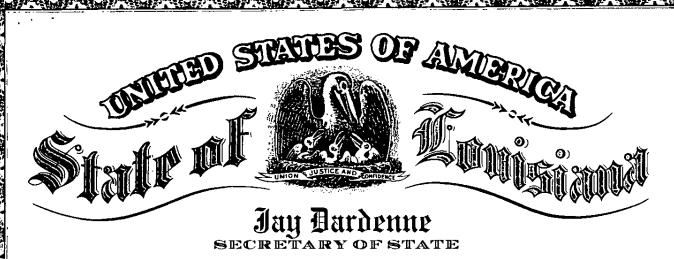
1. BERUENZ COMPANY, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. LOUISIANNA (Jurisdiction under the law of which foreign limited liability company is organized) 4 72-1530108 (FEI number, if applicable)
4. JUNE 17, 2002 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
6. Cate first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 5229 LARK LAWE 9 \(\frac{1}{2} \)
E SC
ALEXANDRIA, LA 71303 (Street Address of Principal Office)
그는 그
8. If limited liability company is a manager-managed company, check here 8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
ANTHONY AMIGO - 5229 LARK LANE ALEXANDRIA, LA 71303
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: REAL ESTATE
Class Co
Signature of a member of an authorized representative of a member. (In accordance with section 608 408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
ANTHONY AMIGO
Typed or printed name of signee

*.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

I. The name of the Limited Liability Company is:		
BERLENZ COMPANY, LLC	<u>,,,.</u>	
If name unavailable, the alternate name to be used in the state of Florida is:		
UNDETERMINED		
√2. The name and the Florida street address of the registered agent and office are:		
OCHABA OSSEDSI DOCL		
(Name)		
18 COQUINA RIDGE WAY		
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
UNEMONIO BEACH FL 32174 City/State/Zip		
Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all strelating to the proper and complete performance of my duties, and I am familiar with and according to the proper and complete performance of my duties, and I am familiar with and according to the proper and complete performance of my duties, and I am familiar with and accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment agent and agree to accept the appointment agent ag	as regist tatutes ecept the	ered
(Signature)	07 DE	SECI
(Signatury)	DEC 31	M CF C
\$ 100.00 Filing Fee for Application	A	989. 10.
\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)	AM 10: 27	STA
\$ 50.00 Certificate of Status (optional)	27	3.E



As Secretary of State, of the State of Louisiana, I do hereby Certify that BERLENZ COMPANY, L.L.C.

A limited liability company domiciled in ALEXANDRIA, LOUISIANA,

Filed charter and qualified to do business in this State on June 17, 2002,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Balon Rouge on, November 15, 2007

ABA 35287448K

Secretary of State

