

N/110000005688

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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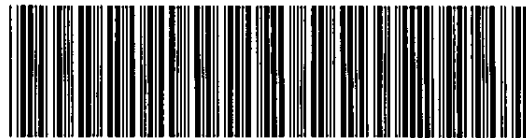
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. MILLIGAN
EXAMINER

OCT 14 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Montres Corum USA, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard C. Louis

Name of Person

Montres Corum USA, LLC

Firm/Company

14050 NW 14th Street

Address

Sunrise FL 33323

City/State and Zip Code

RLouis@CorumUSA.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard C. Louis

Name of Person

at (954) 279-1220

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

28.1/3

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Montres Corum USA, LLC

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: November 9, 2011

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SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: _____
(must contain "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 contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: _____

* See Attached *

7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

* See Attached *
Signature of the authorized representative

Typed or printed name of signee

Filing Fee: \$25.00

If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Teguh Halim	14050 NW 14th Street Sunrise, FL 33323 Suite 110	☒ Add ☐ Remove
MGR	Nicolas Marion	14050 NW 14th Street Sunrise, FL 33323 Suite 110	☒ Add ☐ Remove
MGR	Richard C. Lewis	14050 NW 14th Street Sunrise, FL 33323 Suite 110	☒ Add ☐ Remove
MGR	Sari, Montes Conum	60 1645 Village Center Circle Las Vegas, NV 89134 Suite 60	☐ Add ☒ Remove

If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

PANAGOS + Associates CPAS, LLC

New Registered Office Address:

2893 Executive Park Drive

Enter Florida street address

Weston

Florida

33331

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Robert J. Lewis

PS.3/3

Dated 9/10/14, _____



Signature of a member or authorized representative of a member

Richard C. Louis

Typed or printed name of signee

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