F050000017203

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





300061938973

12/08/05--01031--004 **78.75

Z005 DEC -8 PH 2: 15
SECRETARY OF STATE

三両の

15×1003

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Bentles (Name of	Beach 1015 B Inc Corporation - must include suffix)
Dear Sir or Madam:	
	oration for Authorization to Transact Business in Florida," mitted to register the above referenced foreign corporation to
Please return all correspondence concerning	this matter to the following:
Dennis	Bedard (Name of Person)
	(Name of Person)
Dennis	Bedond Attorney at Law (Firm/Company) 2TH Bayshure Drive, Suite 215 (Address)
	(Firm/Company)
1717 NOR	ETH Bayshore Drive, Suite 215
1.4.	(Address)
Mianu, A	City/State and Zip code)
(0	City/State and Zip code)
For further information concerning this matter	er, please call:
Dennis Bedard at	(305) 530-0795 AFF AFF AFF AFF AFF AFF AFF AFF AFF AF
(Name of Person)	SET 8
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount	t:
☐ \$70.00 Filing Fee	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
1. Bentley Beach 1015 B Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. OB/11/05 (Date of incorporation) 5. Per perus L (Duration: Year corp. will cease to exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1717 NORTH BAUSHORE DRIVE, Suite 215
(Principal office address)
Miami, FL 33132 (Current mailing address)
8. Real Estate (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Vanis Rodood 82 1
Office Address: 1717 North Bayshope Drive, Suite 215 FS AMI , Florida 33/32
MiAMi , Florida 33/32 (City) (Zip code) 23/32
(City) (Zip code)
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.

(Registered agent's signature)

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A, DIRECTORS			
Chairman:			
Address:			
	-		
Vice Chairman:			
Address:			
Director:			
Address:			
Director: ELIAS CHONEIRI			
Address: 1717 North BAYSHORE Drive, Suite 215			
MIAMI, Florion 33132			
B. OFFICERS			
President: Eli AS CHOUEIRI			
Address: 1717 NORTH BAYSHURE DRIVE, Suite 213		2005	
MIAMI, FLORIDA 33/32	<u> 28</u>	- 23	
Vice President:	SSA		
Address:		P	
	SE	5:	
Secretary:	3,24	വ	
Address:		·	
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional officers an	d/or dire	notore	
	a/or and	etors.	
13. (Signature of Director or Officer listed in number 12 of the application)			
14. ELIAS CHOUERI			
(Typed or printed name and capacity of person signing application)			

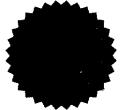
Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF "BENTLEY BEACH 1015B, INC.", FILED IN THIS OFFICE ON THE ELEVENTH DAY OF AUGUST, A.D. 2005, AT 9:26 O'CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.



Darriet Smith Hindson

AUTHENTICATION: 4088563

DATE: 08-12-05

4013721 8100

050662334