F19 00000 3717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Foreign Profit Amend

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2020

BENJAMIN BERTHET
2BC FLORIDA LLC
20200 W DIXIE HWY, SUITE 809
AVENTURA, FL 33180

SUBJECT: FRENCH GLUTEN FREE INC
Ref. Number: F19000003717

We have received your document and check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FOREIGN PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

Please return 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) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 120A00018057

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: French Gluten Free Inc
Name of Corporation

DOCUMENT NUMBER: F19000003717

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Benjamin Belhet
Name of Contact Person

2BC Florida LLC
Firm/Company

2020 W Dixie Highway, Suite 809
Address

Aventura, Fl 33180
City/State and Zip Code

b.belhet@2bc.us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Benjamin Belhet at (941) 726 9984
Name of Contact Person — Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $35 Filing Fee ☐ $43.75 Filing Fee & Certificate of Status ☐ $43.75 Filing Fee & Certified Copy ☐ $52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PROFIT CORPORATION

APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F19000003717
(Document number of corporation (if known))

1. French Gluten Free Inc
(Name of corporation as it appears on the records of the Department of State)

2. Delaware (Incorporated under laws of)

3. 08/09/2019 (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation?_____

5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

_____
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

_____
(New jurisdiction)

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8. **If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent NDC Florida LLC

20200 W Dixie Highway Suite 809
(Florida street address)

New Registered Office Address: Aventura (City), Florida 33180 (Zip Code)

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

_____
Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

Title/ Capacity	Name	Address	Type of Action
VP	Glade Guillaume	323 Sunny Isles Blvd, Ste 740 Sunny Isles Beach, Fl, 33160	☐Add ☒Remove
P	Pierre Bruno	20200 W Dixie Highway Suite 809 Aventura, Fl, 33180	☒Add ☐Remove
T	Cabrit Remi	20200 W Dixie Highway Suite 809 Aventura, Fl, 33180	☒Add ☐Remove
			☐Add ☐Remove
			☐Add ☐Remove

0. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Remi Cabrit — Treasurer

(Typed or printed name of person signing) (Title of person signing)

FILING FEE $35.00