

AMENDED AND RESTATED  
**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 DEC 17 PM 1:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L00000006748

1. Entity Name

BE/ITHACA, L.L.C.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

c/o Atlantia Holdings

Suite, Apt. #, etc.

645 E. Dania Bch. Blvd.

City & State

Dania Beach, FL

Zip

33004

Country

USA

3. Mailing Address

c/o Atlantia Holdings

Suite, Apt. #, etc.

645 E. Dania Bch. Blvd.

City & State

Dania Beach, FL

Zip

33004

Country

USA

4. FEI Number

65-1034717

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Ace J. Blackburn, Jr.

Street Address (P.O. Box Number is Not Acceptable)

Cooney Mattson, et al

2312 Wilton Drive

City

Fort Lauderdale

FL

Zip Code

33305

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

12/16/02

DATE

**FEE IS \$50.00**

**Make Check Payable to Department of State  
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM  
NAME Estate of Konstantinos Boulis  
STREET ADDRESS 645 E. Dania Beach Blvd.  
CITY-ST-ZIP Dania Beach, FL 33004

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP 800009568568

TITLE  
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CITY-ST-ZIP

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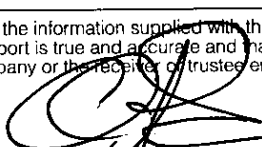
TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the recipient or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:



CHRIS A. ECONOMOU

Date

12/16/02

Daytime Phone #

CR2E083B (12/01)



FILED

02 DEC 17 PM 1:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 859097 4311473

AUTHORIZATION :

COST LIMIT : \$ 50.00

*Patricia P. [Signature]*

ORDER DATE : December 16, 2002

ORDER TIME : 2:02 PM

ORDER NO. : 859097-010

CUSTOMER NO: 4311473

CUSTOMER: Jackie Gerstenfeld, Paralegal  
Stearns Weaver Miller  
Museum Tower, Suite 2200  
150 West Flagler Street  
Miami, FL 33130

ANNUAL REPORT FILING

NAME: BE/ITHACA, L.L.C.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Ginger Simmons-EXT#1139

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
02 DEC 17 PM 4:05  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA