

2/2000038070

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

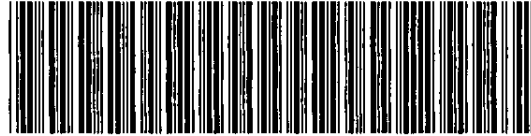
Special Instructions to Filing Officer:

A. LUNT

DEC 21 2012

EXAMINER

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 DEC 20 PM 4:44

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 20, 2012

ZDENEK GONSIOROVSKY
1800 2ND STREET SUITE 715
SARASOTA, FL 34236

SUBJECT: BOHEMIA HEALING MINERAL WATERS, LLC
Ref. Number: L12000038070

We have received your document for BOHEMIA HEALING MINERAL WATERS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. 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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 812A00027973

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bohemia Healing Mineral Waters

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Zdenek Gonsiorovsky

Name of Person

Bohemia Healing Mineral Waters LLC

Firm/Company

1800, 2nd. Street, Suite 715

Address

Sarasota FL 34236

City/State and Zip Code

gonsi@biliner.com

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

For further information concerning this matter, please call:

Zdenek Gonsiorovsky

Name of Person

at (941) 526-9020

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BOTHEMIA HEALING MINERAL WATERS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ZDENEK GONSIOROVSKY
Name of Person

BHMW LLC
Firm/Company

1800 2ND ST., SUITE 715
Address

SARASOTA FL 34236
City/State and Zip Code

GONSI@BILINER.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ZDENEK GONSIOROVSKY at (941) 526 9020
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

FEE ALREADY PAID.

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|--|--|

MAILING ADDRESS:
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Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BOHEMIA HEALING MINERAL WATERS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12 MAR 19/12 and assigned
Florida document number L12000038070

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

BILINER LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

B. 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:

New Registered Office Address:

Enter Florida street address

Florida

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 608, 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

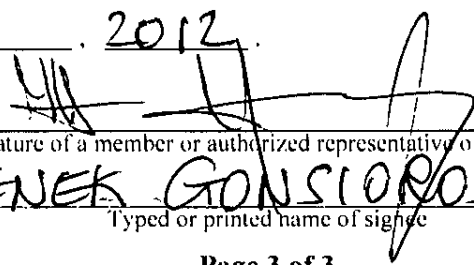
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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CLERK OF STATE
TALLAHASSEE, FLORIDA

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated NOV 30 . 2012 .



Signature of a member or authorized representative of a member

ZDENEK GONSIOROVSKY

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA