

LI 70 00146524

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

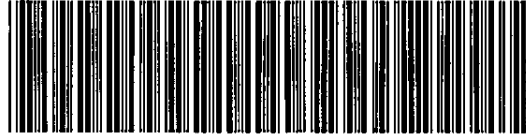
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/23/15--01013--019 **25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Stivers APR 27 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
15 APR 24 AM 10:44
FOR FILING
10 ACKNOWLEDGE
SUFFICIENCY OF FILING

April 15, 2015

~~DAREN TILLMAN~~
~~619 SW 13 AVE~~
~~FT LAUDERDALE, FL 33312~~

*Corporate
Access*

Corrected

SUBJECT: BE HERE HOLDINGS LLC
Ref. Number: L13000146524

We have received your document for BE HERE HOLDINGS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 215A00007462

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BE HERE HOLDINGS 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:

Daren Tillman

Name of Person

BE HERE HOLDINGS LLC

Firm/Company

619 SW 13 AVE

Address

FORT FORT LAUDERDALE, FL 33312

City/State and Zip Code

dmtillman@gmail.com

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

For further information concerning this matter, please call:

Daren Tillman

Name of Person

at (786) 208-3009

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

BE HERE HOLDINGS 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 10/17/2013 and assigned
Florida document number L13000146524

This amendment is submitted to amend the following:

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

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)

2728 Davie Blvd #94

Fort Lauderdale, FL 33312

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:

Danielle Butler, PA

New Registered Office Address:

850 NW Federal Highway Suite 123

Enter Florida street address

Stuart

Florida

33494
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.


If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

AMBR = Authorized Member


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>DAREN TILLMAN</u>	<u>2728 Davie Blvd #94</u> <u>Fort Lauderdale, FL 33312</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>TCHAKA OWEN</u>	<u>1119 BUCHANAN STREET</u> <u>Hollywood, FL 3301</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>President</u>	<u>DAREN M TILLMAN PA</u>	<u>2869 SW 13 CT</u> <u>Fort Lauderdale, FL 33312</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VP</u>	<u>TCHAKA OWEN, PA</u>	<u>1119 BUCHANAN STREET</u> <u>Hollywood, FL 33019</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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 PALM BEACH, FLORIDA

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

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 22, 2015



Doreen M Tillman

Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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