

L15000001544

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PREVIOUS RTN CK FOR CONVERSION &  
ART OF ORG

05/26/15--01040--007 \*\*25.00

FILED  
15 MAY 26 PM 12:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 27 2015

T. BROWN

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BERE LATTE 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:

ROBERT LIPSICK

\_\_\_\_\_  
Name of Person

BERE LATTE LLC

\_\_\_\_\_  
Firm/Company

6901 OKEECHOBEE BOULEVARD SUITE J4

\_\_\_\_\_  
Address

WEST PALM BEACH, FLORIDA 33411

\_\_\_\_\_  
City/State and Zip Code

davidlipsick@yahoo.com

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

For further information concerning this matter, please call:

DAVID LIPSICK

561 222-9841  
at ( )

\_\_\_\_\_  
Name of Person

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

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

BERE LATTE 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 12/22/2014 and assigned  
Florida document number L15000001544

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

**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: DENISE ROBERTS

New Registered Office Address: 1450 ENCLAVE CIRCLE  
*Enter Florida street address*

WEST PALM BEACH, Florida 33411  
*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 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:**

**MGR = Manager**  
**AMBR = Authorized Member**

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	JOHNATHAN GERMAN	6901 OKEECHOBEE BLVD.	<input type="checkbox"/> Add
		SUITE J4	<input checked="" type="checkbox"/> Remove
		W. PALM BEACH, FL 33411	<input type="checkbox"/> Change
MGR	ROBERT LIPSICK	6901 OKEECHOBEE BLVD. J4	<input type="checkbox"/> Add
		W. PALM BEACH, FL 33411	<input type="checkbox"/> Remove
		25% OWNERSHIP INTEREST	<input checked="" type="checkbox"/> Change
MGR	DENISE ROBERTS	1450 ENCLAVE CIRCLE	<input checked="" type="checkbox"/> Add
		W. PALM BEACH, FL 33411	<input type="checkbox"/> Remove
		25% OWNERSHIP INTEREST	<input type="checkbox"/> Change
MGR	MARK DISTASIO	44 VIVIEN STREET	<input checked="" type="checkbox"/> Add
		REVERE, MA 02151	<input type="checkbox"/> Remove
		25% OWNERSHIP INTEREST	<input type="checkbox"/> Change
MGR	TYGE WILLS	14832 DRAFT HORSE LANE	<input checked="" type="checkbox"/> Add
		WELLINGTON, FL 33414	<input type="checkbox"/> Remove
		25% OWNERSHIP INTEREST	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

TWO AND ONE-HALF (2 1/2%) PERCENT OF EACH OWNERSHIP INTEREST WILL BE ALLOCATED  
TO OPERATING EXPENSES AS TO BE DETERMINED

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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

*(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

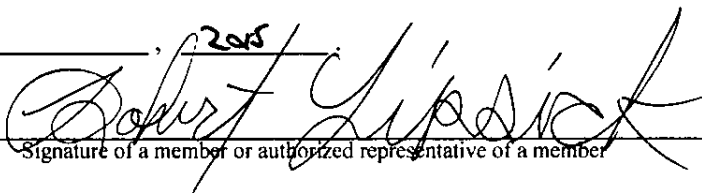
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

5/20

2015



Signature of a member or authorized representative of a member

ROBERT LIPSICK

Typed or printed name of signee