

L16000065640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

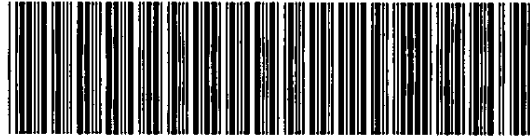
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/25/16--01023--002 **25.00

16 APR 25 PM 3:07
16 MAY -9 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 12 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 27, 2016

FRANK LUIS-JEUNE
1490 NW 41ST STREET
MIAMI, FL 33142 US

SUBJECT: BUILDING ENVELOPE MANAGEMENT, LLC
Ref. Number: L16000065640

We have received your document for BUILDING ENVELOPE MANAGEMENT, 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):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The registered agent must sign accepting the designation.

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) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 016A00008758

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Building Envelope Management, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frank Louis-Jeune

Name of Person

Building Envelope Management, LLC

Firm/Company

1490 NW 41st Street

Address

Miami, FL 33142

City/State and Zip Code

Frank@BEMConsultant.com

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

For further information concerning this matter, please call:

Frank Louis-Jeune at (786) 302-0888
Name of Person 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

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Building Envelope Management

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

1490 NW 41st Street

Miami, FL 33142

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

1490 NW 41st Street

Miami, FL 33142

3. _____ Date of filing/registration in Florida

4. _____ Document number

5. (a) United States Corporation Agents, Inc.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

13302 Winding Oaks Court

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

Suite A

Tampa, FL 33612

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Frank Louis-Jeune

NEW Registered Office Address:

1490 NW 41st Street

Miami, FL 33142

FILED
16 MAY -9 PM 1:15
CLERK OF STATE
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Frank Louis-Jeune

Printed or typed name of signee

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.

Signature of Registered Agent

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

FILING FEE: \$25.00