

L160000132460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

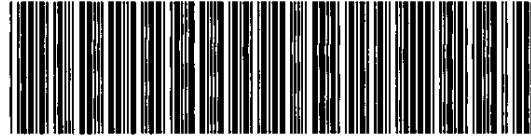
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800286983088

06/27/16--01023--008 **155.00

2016 JUN 27 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
JUN 27 2016
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 5, 2016

BETTY BRENER
B BETTER LLC
3101 SOUTH OCEAN DRIVE #1004
HOLLYWOOD, FL 33019

SUBJECT: BE BETTER LLC
Ref. Number: W16000046822

new name

U, ONLY BETTER L.L.C.

We have received your document for BE BETTER LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is .

P13000069843

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) 245-6052.

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 216A000140

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUN 27 PM 12:05

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BE BETTER LLC
Name of Limited Liability Company

FILED
2016 JUN 27 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

BETTY BRENER

Name of Person

BE BETTER LLC

Firm/Company

3101 SOUTH OCEAN DRIVE #1004

Address

HOLLYWOOD, FL 33019

City/State and Zip Code

bettybrener@me.com

Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BETTY BRENER at 934 2140749

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$130.00 Filing Fee &
Certificate of Status



\$155.00 Filing Fee &
Certified Copy

(additional copy is enclosed)



\$160.00 Filing Fee,
Certificate of Status &
Certified Copy

(additional copy is enclosed)

Mailing Address

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

Street Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BETTER U, ONLY BETTER LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3101 SOUTH OCEAN DR. #1004
HOLLYWOOD, FL 33019

Mailing Address:

3101 SOUTH OCEAN DR. #1004
HOLLYWOOD, FL 33019

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

BETTY BRENER
Name
3101 SOUTH OCEAN DR. #1004
Florida street address (P.O. Box **NOT** acceptable)
HOLLYWOOD FL 33019
City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2016 JUN 27 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

BETTY BRENER
3101 SOUTH OCEAN DR. #100Y
HOLLYWOOD, FL 33019

(Use attachment if necessary)

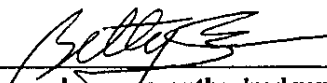
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony as provided for in s.817.155, F.S.

BETTY BRENER

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

2016 JUN 27 PM12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA