

L16000156111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

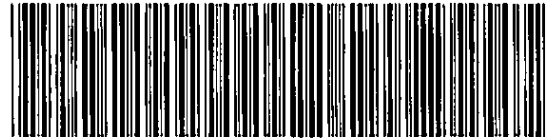
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 4, 2017

DAYAN CHIRINO
6703 GAILLARDIA RD S
JACKSONVILLE, FL 32211

SUBJECT: BEHIKE CONSTRUCTION LLC
Ref. Number: L16000156111

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

There can only be 1 registered agent listed and 1 signing.

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 Supervisor
Registration/Qualification Section

Letter Number: 217A00008824

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Behike Construction 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:

Dayan Milanes Chirino
Name of Person

~~WMA~~ Behike Construction LLC
Firm/Company

10703 Caillardia Rd S
Address

Jax FL 32211
City/State and Zip Code

Lolyp123@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Loly Milanes at (904) 510-8792
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

**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: Behike Construction Llc

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

6703 Gaillardia Rd S

Jacksonville Fl 32211

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

08/19/2016

L1600156111

3. Date of filing/registration in Florida

4. Document number

5. (a) Keeinx Chirino

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

4252 Jillian Dr

Jacksonville

FL

(b) Dayan Milanes Chirino

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

6703 Gaillardia Rd s

Jacksonville

FL 32211

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.

Keeinx Chirino

Signature of a member or authorized representative of a member

Keeinx Chirino

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

Dayan Milanes Chirino Ein: 820599240

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

FILING FEE: \$25.00