

218 000238537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

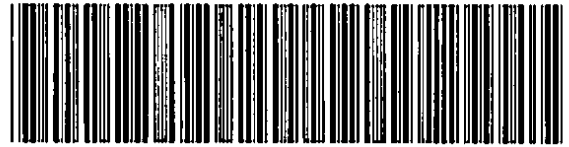
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2023 JAN -9 AM 7:27

SECRETARY OF STATE
TALLAHASSEE, FL

1/19/2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Be Ethics 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:

SANDRA GONORETSKE
Name of Person

Be Ethics LLC
Firm/Company

14951 Royal Oaks Lane, 902
Address

North Miami
City/State and Zip Code

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

For further information concerning this matter, please call:

Sandra Gonoretske at (786) 7403967
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 8, 2022

SANDRA GONORETSKE
14951 ROYAL OAKS LANE 902
NORTH MIAMI, FL 33181

SUBJECT: BE ETHICS LLC
Ref. Number: L18000238537

We have received your document for BE ETHICS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited liability company. Please complete and return the enclosed blank form(s).

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) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 022A00027271

2022 JAN -9 PM 12:46
2023

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: Be Ethics LLC
2. (a) 8375 Sunset Dr - Miami - FL 33143 (b) 14951 Royal Oaks Lane, 902
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)
North Miami - FL
33181
10/08/2018 L 18000238537
3. Date of filing/registration in Florida 4. Document number

5. (a) Gonoretske, Sandra
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

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

17100 N Bay Road STE 1606

Sunny Isles Beach, FL 33160, FL

(b) Sandra Gonoretske

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

14951 Royal Oaks Lane, 902

NEW Registered Office Address:

North Miami - FL

33181, FL

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SECRETARY OF STATE
TALLAHASSEE, FL

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.

Sandra

Signature of a member or authorized representative of a member

Sandra Gonoretske

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.

Sandra

Signature of Registered Agent