

218 000238537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

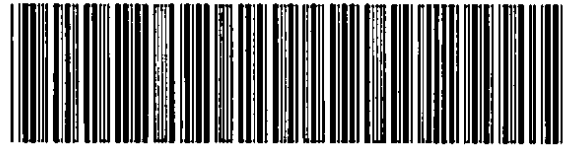
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SECRETARY OF STATE  
TALLAHASSEE, FL

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

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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

3. 10/08/2018 Date of filing/registration in Florida 4. L 18000238537 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

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 SECRETARY OF STATE  
 TALLAHASSEE, 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

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