

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 APR 28 PM 4: 53 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L98000003420 HENCORP BECSTONE SECURITIES, L.C. 777 BRICKELL AVE., SUITE 1010 MIAMI FL 33131		1a. Principal Place of Business Address 777 BRICKELL AVE., SUITE 101 MIAMI FL 33131			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 12/24/1998 3a. State of Formation FL 4. FEI Number ☒ Applied For ☐ Not Applicable	
				5. Date of Last Report 6. Certificate of Status Desired \$8.75 Additional Fee Required ☐	
7. Name and Address of Current Registered Agent HENRIQUEZ, RAUL 777 BRICKELL AVE., SUITE 1010 MIAMI FL 33131			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 500002866525--D Suite, Apt. #, etc. -05/07/99--01022--009 City FL Zip Code		
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reconstituting)			DATE _____		
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	HENRIQUEZ, VICTOR	777 BRICKELL AVE., SUITE 1		MIAMI FL	
MGR	HENRIQUEZ, RAUL	777 BRICKELL AVE., SUITE 1		MIAMI FL	
MGR	CAMPANO, SIXTO	777 BRICKELL AVE., SUITE 1		MIAMI FL	
MGR	SCHAPS, OCSCAR	777 BRICKELL AVE., SUITE 1		MIAMI FL	
MGR	DE LA ROCHE, HERNANDO	777 BRICKELL AVE., SUITE 1		MIAMI FL	
MGR	PARODI DEL RIO, GONZAL	777 BRICKELL AVE., SUITE 1		MIAMI FL	
<i>ju 5-4-99</i>					
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER			4/21/99 (305) 373-9000 Date Daytime Phone #		