## M0100000272

(Req	uestor's Name)	
(Add	ress)	
. (Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
		;

Office Use Only

B. KOHR

JAN - 3 2012

**EXAMINER** 



100213106011

01/03/12--01036--013 \*\*3

1 DEC 21 AM 11: 26

M. HOECA

### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

# RECEIVED 11 DEC 21 PH 12: 27 DIVISION OF CURPURATIONS TALLAHASSEE, FLORIDA

BLACKSTONE EQU	JITIES LLC			
			·	
		-		
	,			
				Art of Inc. File  LTD Partnership File  Foreign Corp. File  L.C. File  Fictitious Name File  Trade/Service Mark  Merger File  Art. of Amend. File  RA Resignation  Dissolution / Withdrawal
		•		Annual Report / Reinstatement  Cert. Copy  Photo Copy  Certificate of Good Standing
				Certificate of Status
			i	Certificate of Fictitious Name  Corp Record Search  Officer Search  Fictitious Search
Signature	<del></del>	. –		Fictitious Owner Search Vehicle Search
Requested by: SETH	12/21/11	11:00		Driving Record UCC 1 or 3 File
Name	Date	Time	·	UCC 11 Search
Walk-In	Will Pick Up			UCC 11 Retrieval

#### **COVER LETTER**

	of Corporations		• •
SUBJECT:		ONE EQUITIES L	
	Name of Foreign	Limited Liability Com	pany
Dear Sir or Mada	m:	. 1	
The enclosed Aff Managing Memb	idavit by Foreign Limite cr(s) and fee(s) are subm	d Liability Company to	Change Manager(s) o
Please return all c	orrespondence concerni	ng this matter to the fo	llowing:
	BRIAN D.SMITH, ESC	<b>).</b>	
	Name of Person	<del></del>	
LAW	OFFICES BRIAN D S	MITH	
!	Firm/Company		
42	O LINCOLN ROAD #2 Address	48	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
MIAN	II BEACH, FLORIDA 3 City/State and Zip Cod		i.
· ·· . <b>á</b> f	ischer@residencesats		• :
E-mail addre	ss: (to be used for future	annual report notificat	ion)
For further inform	nation concerning this me	atter, please call:	,
BRIAN D S	MITH, ESQ. at (	305.)	672-7000
Name	of Person	Area Code and Daytin	e Telephone Number
STREET/	COURIER ADDRESS:	MAILING A Registration	
	Corporations:	Division of C	organitions
Clifton Bu		P.O. Box 632	7
	tive Center Circle , Piorida 32301	Tallahassee, l	florida 32314
. Probosal le a cha	ck for the following an	ionnit.	
525 Filing Fee	✓ \$30 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy
CR2E123(8/07)	, , , , , , , , , , , , , , , , , , ,		:

### AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

This entity was formed un	nder the laws of:	DELAWARE
This entity was authorized its Florida document/reg	i to transact business in I	DELAWARE Florida on02/02/2001 M01000000272
The name and address of	each manager or managi	ng member is as follows:
s: GR" = Manager GRM" = Managing Mem		nd Address:
<b>EM</b>	800 W/	ANA ASTAFUROVA ASHINGTON AVENUE #20 BEACH: FLORIDA 33139
÷ ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		
<del></del>		
quired Signature:		
Signatu	re of Manager, Managin	•