

# M0500000 7047

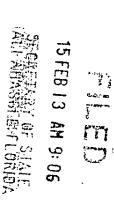
(R	Requestor's Name)			
(A	Address)			
(A	Address)			
(C	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(B	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

\* Office Use Only



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J. SERVICES FEB 20 2015



### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 14, 2015

christian berube 1717 n bayshore dr suite 213 miami, FL 33132

SUBJECT: BENTLEY BEACH ENTERPRISES, LLC

Ref. Number: M05000007047

We have received your document for BENTLEY BEACH ENTERPRISES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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
Registration/Qualification Section

Letter Number: 315A00000829

#### **COVER LETTER**

	legistration Sect Division of Corp		•	
		BEACH ENTERPRIS	ES LLC	
SUBJEC!	l;	Name of Limi	ted Liability Company	
The enclos	sed Articles of A	mendment and fee(s) are sub-	nitted for filing.	
Please reti	urn all correspon	dence concerning this matter t	to the following:	
		CHRISTIAN BERUB	E	
			Name of Person	
		JJN IRREVOCABLE	TRUST	
			Firm/Company	<del></del>
		1717 N. BAYSHORE	E DRIVE, SUITE 213	
			Address	
		MIAMI, FLORIDA 3	3132	
		CBERUBE@GROUP	City/State and Zip Code	
			to be used for future annual report notif	ication)
For furthe	er information co	ncerning this matter, please ca	all:	
CHRISTIAN BERUBE		305 523-3348		
	Name of	Person	Area Code Daytimo	: Telephone Number
Enclosed	is a check for the	e following amount:		
\$25.0	0 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

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

#### **SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: BENTLEY BEACH ENTERPRISES, LLC
2. The Florida document number of this limited liability company is: M0500007047
3. Jurisdiction of its organization: Delaware
4. Date authorized to do business in Florida: 12/23/2005
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company:
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida Street Address  Florida
City Gip Code
New Registered Agent's Signature, if changing Registered Agent:  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.
If Changing Registered Agent, Signature of New Registered Agent  7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

Title/ Capacity	<u>Name</u>	Address	Type of Action
MGR	Christian Berube	1717 N. Bayshore. dr. 21. 33132	3. Hémi, F/ = Add
			Remove
MGRM	GF & DI INVESTMENTS INC		Add
		1717 N. Bayshore dr 33132	215 HikusiH Remove
			□ Remove
		<del></del>	
			Remove 15 FE
) . A l l			Remove J
aforementi	s a certificate, if required: no more ioned amendment(s), duly authention under the law of which this entity	cated by the official having cust	

Filing Fee: \$25.00