

11080000001700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

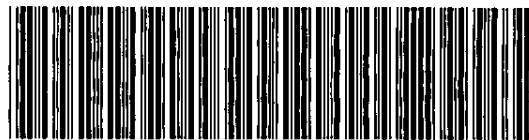
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/06/14--01013--022 **35.00

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2014 MAY - 6 PM 4:23
CLERK OF STATE
TALLAHASSEE, FLORIDA

JUL 15 2014
D. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 24, 2014

DEBBIE ROBERTS
108 LANCASTER FARM ROAD
SALEM, NH 03079

SUBJECT: BUSINESS NETWORK INTERNATIONAL OF ORLANDO, LLC
Ref. Number: M08000001700

We have received your document for BUSINESS NETWORK INTERNATIONAL OF ORLANDO, 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 name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : L07000054961, document number CENTRAL FLORIDA REFERRAL GROUP LLC.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

The document number of the name conflict is .

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 614A00013589

2014 MAY -6 PM 4:23

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 3, 2014

DEBBRE ROBERTS
108 LANCASTER FARM ROAD
SALEM, NH 03079

SUBJECT: BUSINESS NETWORK INTERNATIONAL OF ORLANDO, LLC
Ref. Number: M08000001700

We have received your document for BUSINESS NETWORK INTERNATIONAL OF ORLANDO, 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):

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

A foreign limited liability company which needs to correct any false statement or has changed its name, duration, or jurisdiction should file an amended application in this office within 30 days after the occurrence of any such change. The form should be accompanied by a filing fee of \$25, an additional \$30 for each certified copy (optional) requested, and an original certificate from the domicile state when amending the name, duration, or jurisdiction. Said certificate must evidence the amendment and be issued within the last 90 days.

If the amendment is merely to correct a false statement listed on a document previously filed with the Florida Department of State or does not require an amendment to be filed in its domicile state or country, a certificate is not necessary.

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 614A00011869

FILED
2014 MAY -6 PM 4:23
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Business Network Intl of Orlando, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Debbie Roberts

Name of Person

Central Florida Referral Groups LLC

Firm/Company

108 LANCASTER FARM ROAD

Address

Salem, NH 03079

City/State and Zip Code

d Roberts @ BNINH.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debbie Roberts

Name of Person

at (603) 660 893-5853 ext 201

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

CR2E055 (12/13)

Check for \$35 was sent previously
Ch# 3772 cleared my bank on 5/7/14

FILED
2014 MAY -6 PM 4:23
TALLAHASSEE, FLORIDA

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

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: BUSINESS NETWORK INTERNATIONAL of ORLANDO, LLC
2. Jurisdiction of its organization: New Hampshire
3. Date authorized to do business in Florida: 1/1/02

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: CENTRAL FLORIDA Referral Groups LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(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.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Debra J. Roberts
Signature of the authorized representative

Debra J. Roberts
Typed or printed name of signee

Filing Fee: \$25.00

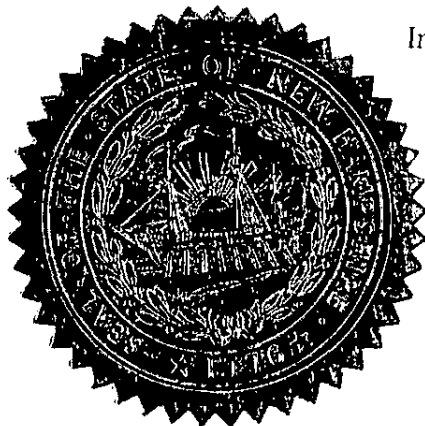
FILED
2014 MAY -6 PM 4:24
CLERK OF CIRCUIT COURT
ALACHUA COUNTY FLORIDA

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that CENTRAL FLORIDA REFERRAL GROUPS, LLC is a New Hampshire limited liability company formed on December 11, 2002. I further certify that it is in good standing as far as this office is concerned, having filed the annual report(s) and paid the fees required by law; and that a certificate of cancellation has not been filed.



In TESTIMONY WHEREOF, I hereto
set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 18th day of June, A.D. 2014

A handwritten signature in cursive script, reading "William M. Gardner".

William M. Gardner
Secretary of State