

77/2000001467

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

A. LUNT

MAY - 7 2011

EXAMINER

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03/30/12--01009--019 **35.00

FILED
2012 MAY -3 PM 4:49
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 4, 2012

HENRIK BRIKEN
1515 NORTH FEDERAL HWY SUITE #300
BOCA RATON, FL 33432

SUBJECT: BRILLYANT MARINE, LLC
Ref. Number: M12000001467

We have received your document for BRILLYANT MARINE, 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.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 312A00011047

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRILLYANT MARINE LLC
Name of Corporation

DOCUMENT NUMBER: M12000001467

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

HENRIK BEIXEN
Name of Contact Person

BRILLYANT MARINE LLC
Firm/Company

1515 NORTH FEDERAL HWY., SUITE #300
Address

BOCA RATON FL 33432
City/State and Zip Code

HENRIK.BEIXEN@BRILLYANTMARINE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HENRIK BEIXEN at (954) 648-1977
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRILLIANT MARINE 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:

HENRIK BRIXEN
Name of Person

BRILLIANT MARINE LLC
Firm/Company

1515 N FEDERAL HWY #300
Address

BOCA RATON FL 33432
City/State and Zip Code

HENRIK.BRIXEN@BRILLIANTMARINE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HENRIK BRIXEN at (954) 648-1977
Name of Person 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

☐ \$55 Filing Fee & Certified Copy

FILED
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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: BRILLIANT MARINE LLC

2. (a) Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

829 SE 10th
POMPANO BEACH FL 33060

(b) Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

SAME AS ABOVE

3. Date of filing/registration in Florida

M12000001467
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

HENRIK BRIXEN

Registered Office Address:

829 SE 10th
POMPANO BEACH FL 33060

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

1515 N. FEDERAL HWY SUITE 300
BOCA RATON FL 33432

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.

Signature of a member or authorized representative of a member

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 608, 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.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00