

MI4000003967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

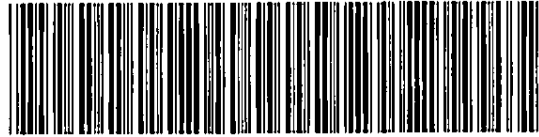
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED

2025 MAY 14 PM 12:09

TALLAHASSEE, FLORIDA

RECEIVED

2025 MAY 14 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT CORP
(850) 656- 4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 05/14/2025

Acc#I20160000072

en: c DW

Name:	Bernhard TME, LLC
Document #:	
Order #:	16232918

Certified Copy of Arts & Amend:	☐		
Plain Copy:	☐		
Certificate of Good Standing:	☐		
Certified Copy of	☐		
Apostille/Notarial Certification:	☐	Country of Destination:	
		Number of Certs:	

Filing: ☒	Certified: ☒	Email Address for Annual Report Notifications:
	Plain: ☐	
	COGS: ☐	

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **55.00**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bernhard TME, 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:

Kaile Mercuri

Name of Person

Bernhard, LLC

Firm/Company

8555 UNITED PLAZA BLVD..SUITE 201

Address

BATON ROUGE, LA 70809

City/State and Zip Code

kaile.mercuri@bernhard.com

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

For further information concerning this matter, please call:

kaile.mercuri@bernhard.com

Name of Person

at (504) 833-8291

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 (9/15)

**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: Bernhard TME, LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address
MAY BE A POST OFFICE BOX)

2025 MAY 14 PM 12:09
TALLAHASSEE, FLORIDA

FILED

2. The Florida document number of this limited liability company is M14000003967

3. Jurisdiction of its organization: Arkansas

4. Date authorized to do business in Florida: 06/06/2014

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: ENFRA TME, 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.")

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 Zip 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:

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

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove

9. Attached is a 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.

/s/ Melissa Samuel

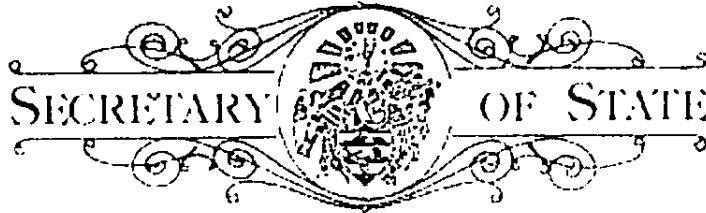
Signature of the authorized representative

Melissa Samuel

Typed or printed name of signee

Filing Fee: \$25.00

STATE OF ARKANSAS



Cole Jester

ARKANSAS SECRETARY OF STATE

To All to Whom These Presents Shall Come, Greetings:

I, Cole Jester, Arkansas Secretary of State of Arkansas, do hereby certify that the following and hereto attached instrument of writing is a true and perfect copy of

Certificate of Amendment

of

BERNHARD TME, LLC

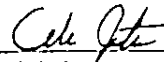
changing the name to

ENFRA TME, LLC

filed in this office

May 09, 2025

In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 9th day of May 2025.


Cole Jester
Secretary of State

Online Certificate Authorization Code: 8562076823c0ac23323
To verify the Authorization Code, visit sos.arkansas.gov





Arkansas Secretary of State

Cole Jester

500 Woodlane Avenue, Suite 256, Little Rock, AR 72201

501-682-3409 • www.sos.arkansas.gov

**CERTIFICATE OF AMENDMENT TO
CERTIFICATE OF ORGANIZATION
for Limited Liability Company**

The undersigned, pursuant to Act 1041 of 2021, sets forth the following:

1. The name of the Limited Liability Company is: Bernhard TME, LLC
and it is duly organized, created, and existing under and by virtue of the laws of the State of Arkansas.
2. The Certificate of Organization was filed on: 05/23/2014
3. Reason for filing the Certificate of Amendment: Name has changed to ENFRA TME, LLC

4. If this is a restatement of Certificate of Organization, please write in the words "Restatement of Articles of
_____ " (fill in with the present name of your company).

I affirm that I am the individual authorized to sign on behalf of the aforementioned entity to be formed and that, under penalty of perjury, the information stated in this record is accurate

Signature

MARK FRANCIS

Name

Manager

Title

Filing Fee: \$25.00

LL-02 Rev. 1/25