M14000003967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CT CORP

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

Date: 05/14/2025

Acc#I20160000072

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:	
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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 at (504) 833-8291
Name of Person — 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) _____

_____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

_____

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

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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

SECRETARY OF STATE

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

SEAL OF THE SECRETARY OF STATE STATE OF ARKANSAS

FILED - Arkansas Secretary of State - Cole Jester - Doc#: 19637894001 - Filing#: 811054221 - Filed On: 5/9/2025 - Page(s): 1

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

M. Francis
Signature

MARK FRANCIS
Name

Manager
Title

Filing Fee: $25.00

LL-02 Rev. 1/25