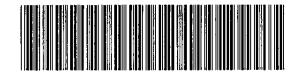


(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
<i>¹</i> ₽^			

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PARTHENT OF STAIL FILTED

SECRETARY OF STAIL
TALLAHASSEE TO DON'T

JAN 11 2016

S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Communication of **Division of Corporations**

HOT INTENDED

TO ACKNOWLEDGE

SUFFICIENCY OF FILING

January 8, 2016

125

CAPITAL CONNECT, INC

SUBJECT: 2400 BEAR LLC Ref. Number: M15000002080

We have received your document for 2400 BEAR 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):

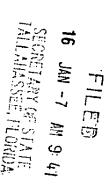
We are enclosing the proper form(s) with instructions for your convenience.

Please return 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.

Shelia H Young Regulatory Specialist II

Letter Number: 916A00000467



CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

2400 BEAR LLC						
				Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File	- 16	
				Trade/Service Mark	;	
			1	Merger File	. MY	<u> </u>
			-	Art. of Amend. File	. 7	Ti.
				PAR Resignation Dissolution / Withdrawal Annual Report / Reinstatement	14:6 WW	<u>बर्</u> ग
			<u></u>			
				Photo Copy		
				Certificate of Good Standing		
			<u> </u>	Certificate of Status		
				Certificate of Fictitious Name		
				Corp Record Search	_	
				Officer Search		
				Fictitious Search		
Signature				Fictitious Owner Search	<u>_</u>	
-				Vehicle Search		
	- 		_	Driving Record		
Requested by: SETH	1/7	AM		UCC 1 or 3 File		
Name	Date	Time	·	UCC 11 Search		
* 1905.8.80	Duit	111110		UCC 11 Retrieval		
Walk-In	Will Pick U	p		Courier		

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 2400 BEAR LLC Name of Foreign Limited I	iability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitt	ed for filing.
Please return all correspondence concerning this matter to	the following:
JONATHAN D. BELOFF	
Name of Person	
BELOFF LAW, P.A.	
Firm/Company	—————————————————————————————————————
1691 MICHIGAN AVE., SUITE 36	
Address	ARY 6
MIAMI BEACH, FL 33139	
City/State and Zip Code	- PAIE ORIDA
JDB@BELOFFLAW.COM	
E-mail address: (to be used for future annual report noti-	fication)
For further information concerning this matter, please call:	
JONATHAN D. BELOFF at (305	673-1101
Name of Person Area C	ode & 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
 -	Filing Fee & S60 Filing Fee, ified Copy Certificate of Status &

CR2E055 (9/15)

Certified Copy

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)

Name of limited liability Company as it appear State: 2400 BEAR LLC	rs on the records of the Florida	a Department of	
Enter new principal office address, if applicable:			
(<u>Principal office address</u> MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		.7	
2. The Florida document number of this limited lie	ability company is: M0000	02080 ALCAR	- NVr 91
3. Jurisdiction of its organization: DELAWA	RE		-7
4. Date authorized to do business in Florida: 3/1	19/15		
SECTION 11 (5-9 complete only the applicable		S.	7 6
5. New name of the limited liability company: (must	st contain "Limited Liability C	Company, ""L.L.C.," or "L	LC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.	naging members adopting the	g business in Florida and at alternate name. The alterna	tach a te name
If amending the registered agent and/or register registered agent and/or the new registered office a	ed officer address on our reco ddress here:	rds, enter the name of the n	<u>ew</u>
Name of New Registered Agent:			
New Registered Office Address:			·
	Enter Flor	rida Street Address	
		, Florida	

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.

		accordance with 605.0902 (1)(e), indicate		
Fitle/ Capacity	Name	Address	Type of Action	
AM	BARRY BRODSKY	120 NE 27 ST, STE 100 Add		
		MIAMI, FL 33137		
S_	BELOFF LAW; P.A.	1691 MICHIGAN AVE., ST	E 360 ∏Add	
		MIAMI BEACH, FL 33	3139 Remove	
			TO SECULAR	
			Remove	
	;		Add Add	
			Remove	
			Add	
		- May - 10-10-10-10-10-10-10-10-10-10-10-10-10-1	Remove	
aforemention	a certificate, if required: no more than 90 ned amendment(s), duly authenticated by under the law of which this entity is orga	the official having custody of records in	the	

Filing Fee: \$25.00