

3-Jan-2019 13:03
From:

Division of Corporations

M180000001046

47188897426 p.1
01/03/2019 14:08 255 E0001/003

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC
Account Number : 07535000353
Phone : (800)221-2972
Fax Number : (888)592-9256

FILED
19 JAN -3 AM 8:55
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BEUMER LIFECYCLE MANAGMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

DEC 04 2019

A. LUNT

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Corporate Filing Menu

Help

3-Jan-2019 13:04 -
From:

+17188897420 p.2
01/03/2019 14:08 #365 P.002/003

**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: BEUMER LIFECYCLE MANAGEMENT, LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

800 APGAR DR
SOMERSET, NJ 08873

Enter new mailing address, if applicable: _____

(Mailing address
MAY BE A POST OFFICE BOX)

800 APGAR DR
SOMERSET, NJ 08873

2. The Florida document number of this limited liability company is: M18000001046

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: 01/30/2018

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

5. New name of the limited liability company: _____
(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

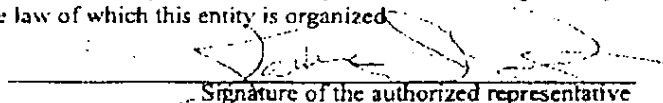
If Changing Registered Agent, Signature of New Registered Agent

3-Jan-2019 13:05 -
From:

+17188897428 p.3
01/03/2019 14:09 #365 P.003/003

FILED
19 JAN -3 AM 8:55
CLERK OF COURT
TALLAHASSEE, FLORIDA

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.


Signature of the authorized representative

Krishnan H. Kankar
Typed or printed name of signee

Filing Fee: \$25.00