

M23000008588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

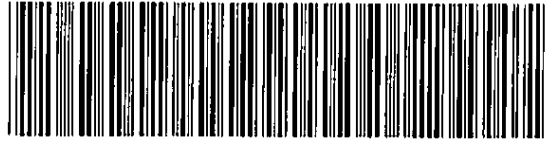
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
DIVISION OF CORPORATIONS
2023 SEP 12 PM 12:40

RECEIVED
2023 SEP 12 AM 10:11
ALLAHASSEE, FLORIDA

R. HUNT
09/12/23

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

Date: 09/12/2023
Acc#I20160000072

en: c DW

Name:	BEVERAGE EQUIPMENT REPAIR, LLC
Document #:	
Order #:	15123482

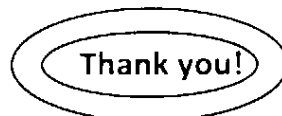
Certified Copy of Arts & Amend:	<input type="checkbox"/>		2023 SEP 12 PM 12:40 FILED CLERK OF COURT DIVISION OF CORPORATE AFFAIRS
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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Email Address for Annual Report Notifications:

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Document ____
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Updater ____
Verifier ____
W.P. Verifier ____
Ref# ____

Amount: \$ **55.00**



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Beverage Equipment Repair, 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:

Deb Nihiser

Name of Person

Morrison & Foerster LLP

Firm/Company

4200 Republic Plaza, 370 Seventeenth Street

Address

Denver, Colorado 80202

City/State and Zip Code

frankie@heliosservicepartners.com

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

For further information concerning this matter, please call:

Deb Nihiser

Name of Person

at (720)

694-2299

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

FILED
STATE OF FLORIDA
DIVISION OF CORPORATIONS
2023 SEP 12 PM 12:40

**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: Beverage Equipment Repair, 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)

2. The Florida document number of this limited liability company is: M123000008588

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: June 30, 2023

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

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "LLC," or "L.L.C.")

(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 "L.I.C.")

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: C T Corporation System

New Registered Office Address: 4303 Ashby Lane

Enter Florida Street Address

Tampa

City

Florida 33624

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.

Devin Randolph Devin Randolph, Assistant Secretary

If Changing Registered Agent, Signature of New Registered Agent

STATE OF FLORIDA
DIVISION OF CORPORATIONS
2023 SEP 12 PM 12:40


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)(c), indicate that change:

Member is replaced; Officer (President) is added

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Member	Gregory M. Pinto	1020 NE Pine Island Rd., Unit #201	<input type="checkbox"/> Add
		Cape Coral, Florida 33909	<input checked="" type="checkbox"/> Remove
Member	Helios Commercial Services, LLC	1020 NE Pine Island Rd., Unit #201	<input checked="" type="checkbox"/> Add
		Cape Coral, Florida 33909	<input type="checkbox"/> Remove
President	Frankie Costa	1020 NE Pine Island Rd., Unit #201	<input checked="" type="checkbox"/> Add
		Cape Coral, Florida 33909	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> 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.

DocuSigned by:

7CE01B66B680443

Signature of the authorized representative

Frankie Costa, President

Typed or printed name of signee

Filing Fee: \$25.00

2023 SEP 12 PM 2:40
DIVISION OF STATE
CORPORATION