

PD200000239104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

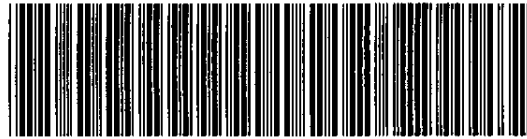
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300188156023

12/07/10--01022--008 \*\*35.00

10 DEC 17 AM 8:34

RECEIVED  
STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA

RA/RO/chg  
@ 12/15/10

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Betta, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P02000023964

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ruben N. Gotlieb  
Name of Contact Person

Gotlieb + Associates  
Firm/Company

801 Brickell Ave, 9th Floor  
Address

Miami, FL 33131  
City/State and Zip Code

Ruben @ gotlieb and associates . com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ruben N. Gotlieb at (305) 789-6684  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
10 DEC 17 PM 12:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

December 9, 2010

RUBEN N. GOTLIEB  
GOTLIEB & ASSOCIATES, P.A.  
801 BRICKELL AVE - 9TH FLOOR  
MIAMI, FL 33131

SUBJECT: BETTU, INC.  
Ref. Number: P02000023964

We have received your document for BETTU, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6964.

Irene Albritton  
Regulatory Specialist II

Letter Number: 310A00028558

12/14 - Attached in letter signed and  
name and title printed.  
Thank you,

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Betta, Inc.
2. The principal office address: 21200 Point Place #603  
Aventura, FL 33180
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/04/2002 Document number: P02000023964
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Steven Lee, P.A.

1699 Coral Way, STE 502

Miami, FL 33145-2860

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Gottlieb & Associates, P.A.

40 Ruben N. Gottlieb

801 Brickell Ave, 9th Floor

P.O. Box NOT acceptable

Miami, FL 33131

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

NATAN GHETE A

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
Signature of Registered Agent

12-2-10  
Date

If signing on behalf of an entity:

Ruben N. Gottlieb - Registered Agent  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

10 DEC 17 AM 8:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA