

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000096138

**Entity Name:** B EFFECT RE LLC

**Current Principal Place of Business:**

2065 ARCH CREEK DR  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

2065 ARCH CREEK DR  
NORTH MIAMI, FL 33181 US

**FEI Number:** 30-0791345

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GARNIER, ALEXANDRE  
2065 ARCH CREEK DR  
NORTH MIAMI, FL 33181 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            GARNIER, ALEXANDRE  
Address        2065 ARCH CREEK DR  
City-State-Zip: NORTH MIAMI FL 33181

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALEXANDRE GARNIER

AMBR

04/19/2016

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date