L05000094783

09/[illegible]/2030 0[illegible]48 [illegible]79 P 01/00[illegible]

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000265304 3)))

H12000265304 3ABCX

Note: *DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so ,* will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

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
BELEX LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$25.00

RECEIVED
12 NOV -6 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2012 NOV -6 AM 8:40

J. SAULSBERRY
EXAMINER
NOV 7 2012

Electronic Filing Menu Corporate Filing Menu Help

J. SAULSBERRY
EXAMINER

H12000265304

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Belex LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

FILED
2012 NOV -6 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 9/27/2005 and assigned Florida document number L05000094783.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

3060 S Miami Ave
Miami, FL 33129

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

3060 S Miami Ave
Miami, FL 33129

B. If amending the registered agent and/or registered office 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: Beatriz R. Anton

New Registered Office Address: 3060 S Miami Ave
Enter Florida street address

Miami, Florida 33129
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 608, 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.

Beatriz Anton

If Changing Registered Agent, Signature of New Registered Agent

H12000265304

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	Beatriz R. Anton	3060 S Miami Ave Miami FL 33129	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2012 NOV -6 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated 11-05 2012.

Beatriz Anton
Signature of a member or authorized representative of a member

Beatriz R Anton
Typed or printed name of signee

Filing Fee: $25.00

H12000265304