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22 H = 7 - 1 PH 3: 18

T. MATTHEWS
MAR - 8 2022

## **COVER LETTER**

TO:

Registration Section

Div	ision of Cor	porations				
elibir <i>c</i> t.	Betacon, L	LC				
SUBJECT:	Name of Limited Liability Company					
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
		FRANK J. ALVAREZ				
			Name of Person			
		BETACON, LLC				
		<del></del>	Firm/Company			
		1301 BLACK BEAR RAS	NCH TRL.			
			Address			
		PIERSON, FL 32180				
		<del></del>	City/State and Zip Code			
		FRANK@BETACON.BIZ				
			to be used for future annual report no	otification)		
hor lurther in	iformation c	oncerning this matter, please c	all:			
FRANK J. A	LVAREZ		386 748-2260 at ( )			
	Name o	f Person		ime Telephone Number		
Enclosed is a	check for th	ne following amount:				
■ \$25,00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	ling Addres		Street Address: Registration S	Section		
Registration Section Division of Corporations			Division of Corporations			
	). Box 632		The Centre of	Tallahassee		
Tal	lahassee, F	·L 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BETACON, LLC

22 H E-1 FH 3: 18

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

The Articles of Organization for this Limited Liability Company	were filed on NOVEN	4BER 30 , 2021	and assigned
Florida document number 1.21000514138			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designa	tion "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		·	
			<u> </u>
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our record	ls, <u>enter the name of</u>	the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida str	reet address	
		, Florida	Lip Code
New Registered Agent's Signature, if changing Registered Agent:	City		ир Спас
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my d rovided for in Chapt	uties, and I am fami er 605, F.S. Or, if th	liar with and iis document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JOSE H. ALVAREZ	1301 Black Bear Ranch Trl. Pierson FL 32180	<b>=</b> Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□ Remove
			□ Change
			□Add
			□ Remove
			Change
<del></del>			□Add
			□Remove
			□ Change
			🗆 Add
		<del></del>	□ Remove
			□Change

(If an e <u>Note:</u>	tive date, if other than the date of filing:
If the recored is t	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	February 24 2022
	Frank A Miles
	Signature of a member/or authorized representative of a member
	<i>y</i>

Typed or printed name of signee