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COVER LETTER

Registration Section

TO:

Division of Co			
SUBJECT:	BELL & BELL	PROPERTIES, LLC	
•	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
		Kimberly Bell	
		Name of Person	
	BELL 8	BELL PROPERTIES, LLC	ZĒPZ AUG SEGĀED TALLAHA
		Firm/Company	F
	13	24 N Nova Road, #125	ASSET
		Address	
			OF STATE
	Or	mond Beach, FL 32174 City/State and Zip Code	g a =
	V:		,-
	E-mail address: (mBell.FL@Gmail.com to be used for future annual report notifica	tion)
For further information	concerning this matter, please of	call:	
	Kim Bell	at (_386) 2	12-8686
Name	of Person	Area Code & Daytime T	elephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing 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)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIEI Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ions er Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

OF BELL & BELL PROPERTIES, LLC

03/16/2006 The Articles of Organization for this Limited Liability Company were filed on _____ L06000029612 Florida document number 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address 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.

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

MGR = Manager

MGRM = Managing Member **Title** <u>Name</u> **Address** Type of Action KIMBERLY B BELL MGRM 124 N NOVA ROAD, #125 ✓ Add ORMOND BEACH, FL 32174 Remove MGRM ERIC M BELL 525 Rosewood Ct, Apt 1A √ Add Indian Harbour Beach, FL 32937 Remove ☐ Add Remove \prod Add Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ____ August 2 Signature of a member or authorized representative of a member Kimberly B Bell Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00