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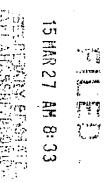
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то:	Registration Sec Division of Corp			
CUDIE	or.	ANA E	BELLE, LLC	
SUBJE	.CI:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	-	
Please	return all correspon	ndence concerning this matter	to the following:	
		ZVI ROSENTHAL		
			Name of Person	
		ANA BELLE, LLC		
			Firm/Company	
		7180 GRAND NATIO	ONAL DR, STE 102	
			Address	
		ORLANDO, FL 328	319	
			City/State and Zip Code	
		ETYSASY@HOTMA	AL.COM to be used for future annual report notifi	(cation)
For fur	ther information co	oncerning this matter, please c	•	
	SASSY	3	at () 927-9760 Area Code Daytime	
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:		
■ \$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Fiting 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ANA BEL	•			
(Name of the Lim	ited Liability Compa (A Florida Limited)	ny as it now appea Liability Company)	rs on our records.)		
The Articles of Organization for this Limited L Florida document numberL080000153		were filed on	02/12/2008	and a	ssigned
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name of	of the limited liab	ility company h	ere:		
The new name must be distinguishable and end with the	words "Limited Liab	pility Company," the	designation "LLC" or	the abbreviation	"L.L.C."
Enter new principal offices address, if appli	cable:	7180 GRAN	ND NATIONAL E	OR, STE 10	2
(Principal office address MUST BE A STREI	ET ADDRESS)	ORLANDO	, FL 32819		·
Enter new mailing address, if applicable:		-	ND NATIONAL E	OR, STE 10	2
(Mailing address MAY BE A POST OFFICE	<u>(BOX)</u>	ORLANDO	, FL 32819		
B. If amending the registered agent and registered agent and/or the new registered o	ffice address her	<u>e</u> :	n our records, <u>en</u>	ter the name	- A
Name of New Registered Agent:	ZVI ROSEN	NIHAL		<u> </u>	
New Registered Office Address:	7180 GRAN		DR, STE 102	· 27	` ;
	ORLANDO	Enter Flo	rida street address , Florida	32819	
		City		Zip Code	Page of
New Registered Agent's Signature, if changing	Registered Agent:			Cúi	

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 605, 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 Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
P/MGR	ZVI ROSENTHAL	6312 BUFORD ST, #404	■ Add
		ORLANDO, FL 32835-2356	Remove
MGRM	ALFONSO SASSY	7588 TOSCANA BLVD #414	□ Add
		ORLANDO, FL 32819	Remove
MGR	ALFONSO SASSY	7588 TOSCANA BLVD #414	
		ORLANDO, FL 32819	Remove
			Add Remove
			27 AH 80 Add
			□ Remove
			Remove

	<u>-</u>		
			
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