10800019377

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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EXAMINER



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SECRETARY OF STATE OIVISION OF CORPORATION

COVER LETTER

TO:	Registration Sec Division of Corp			•
SHRII	ECT: Bellagio	LLC		
3000	<u> </u>	(Name of Limi	ited Liability Company)	
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	dence concerning this matter	to the following:	
		Pieter Weyts		
			(Name of Person)	
		Bellagio LLC	(Firm/Company)	
		1521 Alton Rd #409	(Address)	
		Miami Beach, FL 33139	(City/State and Zip Code)	
For fu	rther information co	ncerning this matter, please co	all:	
Pieter	Weyts (Name of	f Person)	at (646) 413-9370 (Area Code & Daytime T	elephone Number)
Enclos	sed is a check for the	e following amount:		
☑ \$2	5.00 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)

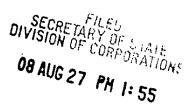
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



BELLAGIO LLC		•
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears or a Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability	Company were filed on AUGUS	T 19, 2008 and assigned
Florida document number L08000079377	·	
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	mited liability company here:	
Bellagio Group LLC		
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD)	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter	Florida street address)
		, Florida
	(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 Changing Registered Agent, Signature of New Registered Agent)

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

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	ALEXANDER WEYTS	1521 ALTON RD #409 MIAMI BEACH, FL 33139, US	Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter o	change(s) here: (Attach additional sheets, if necessary.)	_
			_
Dated AUGUS	, 2		
_	Signature of a m	ember or authorized representative of a member	
	PIETER WEYTS	Typed or printed name of signee	
		- ^ L L	

Page 2 of 2

Filing Fee: \$25.00