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EXAMINER



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SECRETARY OF STATE DIVISION OF CORPORATIONS

: COVER LETTER

Registration Section

TO:

Division of Corporations					
SUBJECT:	Belle Enter	rprises Group LLC			
		ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
		Tanya Sullivan			
		Name of Person			
Belle Enterprises Group					
Firm/Company					
	17173 SW 143 COURT				
	Address				
	MIAMI FL 33177				
		City/State and Zip Code	······································		
	BELLE.E	NTERPRISES@GMAIL.C	OM		
		•	uncation)		
For further information	concerning this matter, please of	call:			
TAN	NYA SULLIVAN	at (786)	302-3455		
Name of Person		Area Code & Dayti	me Telephone 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 enclose	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Regis Divis P.O.	LING ADDRESS: stration Section tion of Corporations Box 6327 hassee, FL 32314	STREET/COUI Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	corations Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Cor (A Florida Limit	npany as it now appeated Liability Company)	ers on our records.)			
The Articles of Organization for this Limited Liability Comp. Florida document number L09000012409			and ass	igned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	liability company he	<u>re</u> :			
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Comp	any," the designation "L	LC" or the a	bbreviation	
Enter new principal offices address, if applicable:				9	
(Principal office address MUST BE A STREET ADDRESS	<u></u>		- - -	38	
		· · · · · · · · · · · · · · · · · · ·	8	₽ ₩	
			42	- - 2	
Enter new mailing address, if applicable:			79	3867	
(Mailing address MAY BE A POST OFFICE BOX)		·	7.	\$9	
			12		
			· · · · · · · · · · · · · · · · · · ·	*	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, enter tl	<u>ie name o</u>	f the new	
Name of New Registered Agent:					
		*** V			
New Registered Office Address:	E	nter Florida street addr	ess		
	City	, Florida	Zip Code	,	
New Registered Agent's Signature, if changing Registered Ag	•		anp com		
I hereby accept the appointment as registered agent and the provisions of all statutes relative to the proper and co accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	agree to act in this complete performance as provided for in C	e of my duties, and I a Chapter 608, F.S. Or, i	m familiar if this docu	with and ment is	

'amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Name Address Type of Action Title ☐ Add ☐ Remove ☐ Remove ☐ Add Remove ☐ Add Remove ∏Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) LLC IS CURRENTLY OPERATING AS PHOTOGRAPHY BUSINESS. I WOULD LIKE THIS CHANGED TO OPERATE AS LACTATION COUNSELING.

FEB 5 2010 .

Signature of a number of authorized representative of a member TANYA SULLIVAN

Dated

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00