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(Re	equestor's Name)	
(Ad	ldress)	·
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(Bu	isiness Entity Nar	ne)
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COVER LETTER

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	istration Se sion of Cor			
SUBJECT:	beta	xut asc		
		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Sebootien '	Verrier Name of Person	
		Betayit sec	Firm/Company	
		333 Arthur Godfo	ey hd. etc 616 Address	
		Wiomi beach, Fl.	23.HC) City/State and Zip Code	
		Office Ocherealt	いたい to be used for future annual report notif	ication)
For further in	formation co	oncerning this matter, please ca		<i>roundly</i>
_Sebce	tien Verri	ec	at (306) 749 - 75	5 00
	Name of	Person	Area Code Daytime	: Telephone Number
	check for th	e 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)

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

betay t ddC		
(Name of the Limited Liability Compa (A Florida Limited)	i <mark>ny as it now appears on our records.</mark>) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 1/6/2010 and as	ssigned
Florida document number 41000001935.	1 1	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "l	L.L.C."
Enter new principal offices address, if applicable:	333 Arthur Endfrey Rd 6te 616	
(Principal office address MUST BE A STREET ADDRESS)	6te 616	
	Wicmi Beach, Fl 33KO	
Enter new mailing address, if applicable:	333 Arthur God Frey Ad.	
(Mailing address MAY BE A POST OFFICE BOX)	Ste 616	
	Micmi beach, FI 33140 E.	
B. If amending the registered agent and/or registered of		3 . 771
registered agent and/or the new registered office address here	trice address on our records, enter the quame $\underline{\mathbf{e}}$:	or the new
		3
Name of New Registered Agent:	`	
New Registered Office Address:	IND	යා
New Negisiered Office Address.	Enter Florida street address	<u></u>
	, 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 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 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>	Name	Address	Type of Action
<u>Ugr</u>	Sebastien Verrier	333 Acthur Godfrey Qd	D Add
		Ste 616	Remove
		Lionibeach, Fl. 33140	Change
			Add
			□ Remove
			Change
			TALLIAHAY
			HASSEE, FLORIDA
			ORIDA Add
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ated May	11	ger A	 :			
ited <u>May</u>	Signature	of a member or author	rized representative o	f a member		-

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Filing Fee: \$25.00