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## **COVER LETTER**

TO: Registration Section
Division of Corporations

**BELWOOD ENTERPRISES LLC** 

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN W. HELSHA JR

Name of Person

BELWOOD ENTERPRISES LLC

Firm/Company

4607 MILE STRETCH DR

Address

HOLIDAY, FL 34690

City/State and Zip Code

belwood.pub@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN W. BELSHA JR

, <sub>7</sub>27、940-2622

Area Code & Daytime 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 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

## **BELWOOD ENTERPRISES LLC**

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

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Company were filed on 11/29/2011	and assigned
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ords "Limited Liability Company," the designate	ion "LLC" or the abbreviation
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stered office address on our records, <u>en</u> <u>dress here</u> :	ter the name of the new
Enter Florida street address	
, Florid	
City	Zip Code
	rited liability company here:  ords "Limited Liability Company," the designate  RESS)  stered office address on our records, endiress here:  Enter Florida street

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

SPRING HILL, FL 34606	e of Action
MGRM ROBIN D. HEYWOOD 230 CALLAWAY AVE ✓	✓ Add
	Remove
SPRING HILL, FL 34606	Z Add
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D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	0.110
Dated	$\frac{2/19}{\sqrt{2}}$
	Signatury of a member or authorized representative of a member
	JOHN W. BELSHA JR
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

2018 FEB 22 FA 2: 07