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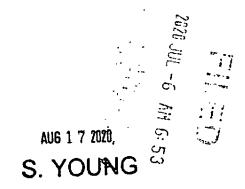
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COVER LETTER

TO: Registration Division of C	Section Forporations		
SUBJECT: GEORG	IA BELL, LLC		
DODOLCI.	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing	
	pondence concerning this matter	_	
	JOAN BENNETT		
		Name of Person	
	KEYSTONE PROPERTY	MANAGEMENT INC	
	·	Firm Company	
	765 W 41ST STREET		
		Address	
	MIAMI BEACH FL 33140)	
	keystone13@aol.com	City/State and Zip Code	
	E-mail address; ()	to be used for future annual report not	dication)
for further information	concerning this matter, please co	ıll;	
IOAN BENNETT		305 532-7878	
Name	of Person	at () Area Code Daytim	e Telephone Number
inclosed 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 Addre Registration Division of O P.O. Box 63.	Section Corporations	Street Address: Registration Sec Division of Corp The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GEORGIA BELL, LLC		20
(<u>Name of the Limited Liabi</u> (A Flore	lity Company as it now appears on our records.) da Limited Liability Company)	Lype at a
The Articles of Organization for this Limited Liability Florida document number L13000033532		and assigned
This amendment is submitted to amend the following:		ა ა
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD.)		the abbreviation "L.L.C."
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BON)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter the</u>	name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street uddress	
	Citr . Florida	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 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>	<u>Name</u>	Address	Type of Action
MGR	JOAN BENNETT	765 WEST 41 STREET	Add
		MIAMI BEACH FL 33140	
			Change
MGR	JOAN BENNET REV. TRUST	765 WEST 41 STREET	€Add
		MIAMI BEACH FL 33140	LlRemove
			LIRemove
		·	ZChange
			□Remove
			
			URemove
			Change
			TAdd
			⊟Remove
			- Change

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JUNE 27 2020	it ine date inserted in this t	nock does not meet	the applicable s	of filing or more tha tatutory filing requ	(optional) n 90 days after filing.) frements, this date v	Pursuant to 605.0207 vill not be fisted as
Signature of a member or authorized representative of a member	ecord specifies a delayed effecti is filed.	ve date, but not an e	effective time, a	12:01 a.m. on the	earlier of: (b) The	90th day after the
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Filing Fee: \$25.00