14000038507





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04/29/14--01017--014 **60.00



B. BOSTICK

JUN - 5 2014

FXAMINER

COVER LETTER

TO: Registration Sec Division of Corp					
BELIE	EF, LLC				
SUBJECT:		ted Liability Company			
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.			
Please return all correspon	ndence concerning this matter to	o the following:			
	ANDREA DA	ALLE MOLLE			
		Name of Person			
		Firm/Company			
	6545 NW 39	TH TERRACE			
		Address			
	BOCA RATO	DN, FL 33469			
	ANDREA DALLEN	City/State and Zip Code OLLE@GMAIL.COM			
		o be used for future annual report notifica	ation)	. ::	. •
For further information co	oncerning this matter, please ca	11;			6 200 6 200
ANDREA D	ALLE MOLLE	786 660172	26	RY C	T T
Name of		at ()	elephone Number		C
				7. The second se	
Enclosed is a check for the	e following amount:				
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filin Certificate Certified Co (additional co	of Status &	

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

(Name of the Limited Liability ((A Florida Li	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number L1400038507	npany were filed on MARCH 07, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
BELIEVE TRAINING GROUP, LLC		
The new name must be distinguishable and end with the words "Limite	ed Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		***
(Principal office address MUST BE A STREET ADDRES	(22)	INITE IN
		35 W F
		THE TO ME
Enter new mailing address, if applicable:		3.7
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		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:

BELIEF LLC

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			Add
			□ Remove
			Remove
			THE TO SEE
			☐ Remove
			☐ Remove
			□ Remove

D. 1	f amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(The effective date, if other than the date of filing:
I	Dated JUN 01 2014
	Signature of a member or authorized representative of a member ANDREA DALLE MOLLE
	Total or printed purpos of circum

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1730 P 1:01

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 6, 2014

ANDREA DALLE MOLLE 6545 NW 39TH TERRACE BOCA RATON, FL 33496

SUBJECT: BELIEF LLC Ref. Number: L14000038507

We have received your document for BELIEF LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P10000078670.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 714A00009675