From: GFI FaxMaker

To: (850)6176383,27658

Page: 2/5

Date: 9/29/2015 2:02:48 PM

Division of Corporations

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Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: MARKS GRAY, P.A.

Account Number : I20040000191

Phone Fax Number : (904)398-0900 : (904)399-8440

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** Email Address: ecarter@marksgray.com

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From: GFI FaxMaker

To: (850)6176383,27658

Page: 3/5

Date: 9/29/2015 2:02:48 PM

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ART	ICLES OF (ORGANIZATION	
.P •	•)r · ·	in the second se
Belilos Asset Management, LLC			
(Name of the Lim	ted Liability Comp (A Florida Limited	any as it now appears on our reco Liability Company)	prds.)
	–	09/25/2015	
he Articles of Organization for this Limited L	iability Company	were filed on	and assigned
orida document number L15000164421	*		
his amendment is submitted to amend the fol-	lowing:		
If amount in a name of the same name of	.Cab Iiia Iil	atlidas anno manus B	
. If amending name, enter the new name o	i the limited [18]	only company nere:	
V/A he new name must be distinguishable and contain the	amada "T imited T inh	ilin Company " the designation "I	I C" or the abhumistics "I I C"
he new name must be distinguishable and contain the	words Limited List		LC of the soorevation L.L.C.
Enter new principal offices address, if applicable:		N/A	
Principal office address MUST BE A STRE	ET ADDRESS)		
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Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
			<u> </u>
			April 1
. If amending the registered agent and			rds, enter the name of the n
gistered agent and/or the new registered o	<u>ffice address he</u>	<u>re</u> :	
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida street add	iress
			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

Page 1 of 3

From: GFI FaxMaker To: (850)6176383,27658 Page: 4/5 Date: 9/29/2015 2:02:48 PM (((H150002336953)))

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	Elliot E. Belilos	12888 Shirewood Ln	
		Jacksonville, Florida 32224	≡ Remove
		*****	Change
MGR	Elias E. Belilos	12888 Shirewood Ln	
		Jacksonville, Florida 32224	□ Remove
			2 chthat
			T BAG T
			Remove T
			□ Add
			☐ Remove
	,		☐ Change
			Add
			Remove
			☐ Change
			D Add
			☐ Remove
			Change

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- <u></u>				FLORIDA	
					6
(If an effective date Note: If the date	te inserted in this block	e specific and cannot be prior to	date of filing or mon le statutory filing ((optional) e than 90 days after filing.) Pursu requirements, this date will no	ant to 605.0207 (3)(b) of be listed as the
If the record sp (b) The 90th d	ecifies a delayed e lay after the recor	effective date, but not a	an effective tin	ne, at 12:01 a.m. on th	e earlier of:
Dated Septemb	per 29	2015	, •		
	Si	gnature of a member or pathon.	zed representative o	f a member	
John	n R. Crawford, authori	zed representative Typed or printed			
		13 hea or brunen	mane in signer		

Page 3 of 3

Filing Fee: \$25.00

(•) MarksGray

FAX TRANSMISSION

Phone: (904) 398-0900

Fax: (904) 399-8440

1200 Riverplace Blvd. Suite 800 Jacksonville, FL 32207

Date:

9/29/2015

To:

From:

Elizabeth Carter

Subject:

Articles of Amendment to Articles of Organization

Message: Please see the attached articles of amendment for Belilos Asset Management,

LLC. Please file these today and if possible make effective as of the date of

filing which was 9/25/15. Thank you for your help!

FILLU

15 SEP 29 MI O 06

SERVETARY OF STATE

ANALYSIS FI ONBA

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