L16000011601

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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S. YOUNG

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

| Division of Cor | porations | | | |
|----------------------------|--|--|--|----------|
| BEL WIL, | LLC. | | | |
| SUBJECT: | Name of Lim | ited Liability Company | | |
| The englaced Articles of | Amendment and fee(s) are sub | mitted for filing | | |
| | | - | | |
| Please return all correspo | ondence concerning this matter | to the following: | | |
| | Junior A Morales-Barreto | | | |
| | | Name of Person | | |
| | BEL WIL, LLC. | | | |
| | | Firm/Company | | |
| | 2417 GALIANO STREET | | | . |
| | | Address | | क रे |
| | CORAL GABLES, FL 33 | 134 | | |
| | | City/State and Zip Code | | w fil |
| | peter-financial@hotmail.co | | | T |
| | | to be used for future annual report notif | ication) | |
| For further information c | oncerning this matter, please ca | all: | | 5 |
| JUNIOR A. MORALES | -BARRETO | 407 989-9874 at () | | |
| Name o | f Person | Area Code Daytime | Telephone Number | |
| | | | | |
| Enclosed is a check for th | ne 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 State Certified Copy (additional copy is enc | |
| Registr Divisio | ING ADDRESS: ation Section n of Corporations ox 6327 | STREET/COURING Registration Section Division of Corpora Clifton Building | 1 | |

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| BEL WIL, LLC. | | | | |
|---|---|--|------------------------------|--|
| (Name of the Lim) | ted Liability Compa (A Florida Limited | any as it now appears on our Liability Company) | records.) | |
| The Articles of Organization for this Limited L. Florida document number L16000011601 | iability Company | were tiled on 01/19/2016 | and as | signed |
| This amendment is submitted to amend the following | owing: | | | |
| A. If amending name, enter the new name of | f the limited liab | oility company here: | | |
| The new name must be distinguishable and contain the v | vords "Limited Liabi | ility Company," the designation | "LLC" or the abbreviation "I | 1C." |
| Enter new principal offices address, if applic | rable: | 3729 Ricky Lane | | |
| (Principal office address MUST BE A STREI | | Saint Cloud, FL 34772 | | 32:0 |
| | | | 5.3 | (T. 7) |
| Enter new mailing address, if applicable: | | 3729 Ricky Lane | ਲ ਹ | # 75.7 17.75 |
| (Mailing address MAY BE A POST OFFICE | <u>BOX)</u> | Saint Cloud, FL 34772 | | |
| | | · | | |
| B. If amending the registered agent and registered agent and/or the new registered o | • • | | cords, enter the name | of the n |
| Name of New Registered Agent: | Junior A Mora | les-Barreto | | |
| New Registered Office Address: | 3729 Ricky La | | | |
| | | Emer Florida street | | |
| | Saint Cloud | <u></u> | Florida <u>34772</u> | |
| | | City | Zip Code | |

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 y for the form that the limited liability company has been notified in writing of this change.

> If Changing gistered Agent, Signature of New Registered Agent

Page f of 3

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> | <u>Address</u> | Type of Action |
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Page 3 of 3

Filing Fee: \$25.00



Detail by Entity Name

Florida Limited Liability Company

BEL WIL, LLC

Filing Information

Document Number

L16000011601

FEI/EIN Number

NONE

Date Filed

01/19/2016

Effective Date

01/15/2016

State

FL

Status

ACTIVE

Principal Address

2417 GALIANO STREET C/O FRANK MARTINEZ PA CORAL GABLES, FL 33134

Mailing Address

PO BOX 371303 C/O FRANK MARTINEZ PA CORAL GABLES, FL 33134

Registered Agent Name & Address

FRANK MARTINEZ PA 4770 BISCAYNE BLVD #900 C/O FRANK MARTINEZ PA MIAMI, FL 33134

Authorized Person(s) Detail

Name & Address

Title MGR

MORALES-BARRETO, JUNIOR A PO BOX 371303 C/O FRANK MARTINEZ PA MIAMI, FL 33137

Annual Reports

No Annual Reports Filed

Document Images

16 AUS 18 PM 1: 23

| 01/19/2016 Florida Limited Liability | View image in PDF format |
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