L16000037765

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

SUBJECT:	Brownbell Ho	ldings LLC			
SUBJECT:		Name of Limite	d Liability Company		<u> </u>
The enclosed	Articles of An	nendment and fee(s) are submi	tted for filing.		
Please return	all correspond	ence concerning this matter to	the following:		
		Julion Bell			
			Name of Person	•	
		Brownbell Holdings LLC			
			Firm/Company	<u> </u>	
		3606 Millenia Blvd #2302			
			Address		
		Orlando, FL 32839			
			City/State and Zip Code	;	
		brownbellrealty@gmail.com			
		E-mail address: (to	be used for future annual	l report notification	
For further in	formation cond	cerning this matter, please call	:		
Julion bell				612206	
	Name of Pe	erson	at () Area Code	Daytime Telep	hone Number
Enclosed is a	check for the f	ollowing amount:			
≅ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is en		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida L	Company as it now appears on our recordinited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Cor Florida document number <u>L16 000 3 7 4</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
he new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "1.1.0	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	(SS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		*
) If any live the maid and a second		
If amending the registered agent and/or registered agent and/or the new registered office addresses		s, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre.	27.
		orida
	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

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

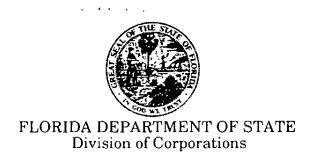
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Julion Bell	3606 Millenia Blvd #2303	
		Orlando FL, 32839	
			☐ Change
AMBR	Felecia Brown	3606 Millenia Blvd #2303	Add
		Orlando FL, 32839	Remove
			Change
			Add
			☐ Remove
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Note:	.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl 90th day after the record is filed.
Dated _	<u></u>
	Carlos for the second
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00



October 16, 2017

JULION BELL 3606 MILLENIA BLVD #2302 ORLANDO, FL 32839

SUBJECT: BROWNBELL HOLDINGS LLC

Ref. Number: L16000037965

We have received your document for BROWNBELL HOLDINGS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PAGE 1 MISSING

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.

Letter Number: 817A00020849

Yasemin Y Sulker Regulatory Specialist II

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