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COVER LETTER

| Division of Corporations | ~ | | |
|--|-----------------|---------------------------------|---|
| SUBJECT: Belan LLC Name of Foreig | n Limited Liab | oility Compa | anv |
| Dear Sir or Madam: | | , | **** |
| The enclosed application, certificate and fee(s) | are submitted | for filing. | |
| Please return all correspondence concerning thi | s matter to the | following: | |
| Nicole Rodriguez | | | |
| Name of Person | | _ | |
| Belan LLC | | | |
| Firm/Company | | _ | |
| 10235 La Reina Road | | | |
| Address | | | |
| Delray Beach, Florida 3344 | 1 6 | | |
| City/State and Zip Code | 2 | _ | |
| Nicole@911urgent.com | | | |
| E-mail address: (to be used for future annual | report notifica | ation) | |
| For further information concerning this matter, | please call: | | |
| Nicole Rodriguez | at (954 | ,681- | 3621 |
| Name of Person | Area Cod | e & Daytim | e Telephone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | | Registra Division P.O. Bo | NG ADDRESS: ation Section n of Corporations ox 6327 ssee, Florida 32314 |
| Enclosed is a check for the following amount \$25 Filing Fee \$30 Filing Fee & Certificate of Status | ☐ \$55 Fil | ing Fee & ed Copy | S60 Filing Fee, Certificate of Status & Certified Copy |

CR2E055 (9/15)

TO: Registration Section

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Dele | AN LL | |
|--|--|------------------------------------|
| (Name of the Limited Liab (A Flori | ility Company as II now appears on our ida Limited Liability Company) | r records.) |
| The Articles of Organization for this Limited Liability | Company were filed on SEP | T.5,2018 and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the li | mited liability company here: | - · |
| The new name must be distinguishable and contain the words "L | imited Liability Company," the designation | on "LLC" or the abbreviation #L.C. |
| Enter new principal offices address, if applicable: | | SEP SEP |
| (Principal office address MUST BE A STREET ADI | ORESS) | 1 |
| Enter new mailing address, if applicable: | | AM 6: 51 |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or regregistered agent and/or the new registered office ad | | records, enter the name of the nev |
| Name of New Registered Agent: | | |
| New Registered Office Address: | · | |
| | Enter Florida stree | et address |
| | | 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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | Name | Address | Type of Action |
|--------------|---------------|--|----------------|
| MBR | Thereon Linde | or 10235 La Preina Pol | |
| | | er 10235 La Preina Bol Delroy Beach Fl. | 33AAU |
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| effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more than 9. If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records. | (optional) Odays after filing.) Pursua | nt to 605.02 |
| record specifies a delayed effective date, but not an effective time, at The 90th day after the record is filed. | :12:01 a.m. on the | earlier (|
| - 10/ | | |
| $\frac{9}{15} \frac{2018}{1000}$ | , | |

Page 3 of 3

Filing Fee: \$25.00