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TALL ARASSET FL SECRETARY OF STATE SECRETARY OF STATE

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## **COVER LETTER**

BELLO EST						
	`ATE MANAGEMENT, LLC					
	Name of Lim	ited Liability Company				
l Articles of A	amendment and fee(s) are sub	mitted for filing.				
all correspon	dence concerning this matter	to the following:				
	Sarah H. Lavelanet, Esq.					
		Name of Person				
	Shapiro, Blasi, Wassermar	a & Hermann, P.A.				
		Firm/Company				
	7777 Glades Road, Suite 4	00				
		Address				
	Boca Raton, FL 33434					
	·	City/State and Zip Code				
	jlandolfi@sbwh.law					
	E-mail address; (	to be used for future annual report notifi	ication)			
nformation co	ncerning this matter, please co	all:		"	~ 1	
velanet, Esq.		561 477-7800 at ( )		TAL	023 S	Comme
Name of	Person	Area Code Daytime	Telephone Number	22 720	<del>-</del>	
check for the	following amount:			\$ 20° 1	> %	
iling Fee	☐ \$30.00 Fiting Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate Certified (	e of <b>Şīḍ</b> tus <b>&amp;</b> Copy	, So	V
	nformation convelanet, Esq.	Articles of Amendment and fee(s) are subtable all correspondence concerning this matter  Sarah H. Lavelanet, Esq.  Shapiro, Blasi, Wasserman  7777 Glades Road, Suite 4  Boca Raton, FL 33434  jlandolfi@sbwh.law  E-mail address: ( information concerning this matter, please case)  velanet, Esq.  Name of Person  a check for the following amount:  Filing Fee   \$30.00 Filing Fee &	Shapiro, Blasi, Wasserman & Hermann, P.A.  Firm/Company  7777 Glades Road, Suite 400  Address  Boca Raton, FL 33434  City/State and Zip Code  jlandolfi@sbwh.law  E-mail address: (to be used for future annual report notifinformation concerning this matter, please call:  velanet, Esq.  Name of Person  Name of Person  Area Code  Daytime  check for the following amount:  Filing Fee  \$30.00 Filing Fee & Certified Copy	Articles of Amendment and fee(s) are submitted for filing.  Sarah H. Lavelanet, Esq.  Name of Person  Shapiro, Blasi, Wasserman & Hermann, P.A.  Firm Company  7777 Glades Road, Suite 400  Address  Boca Raton, Fl. 33434  City/State and Zip Code  jlandolfi@sbwh.law  E-mail address: (to be used for future annual report notification)  information concerning this matter, please call:  velanet, Esq.  Name of Person  Area Code  Daytime Telephone Number  is check for the following amount:  Gling Fee  S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee & Certified Copy  Certificate of Status  Certified Copy  Certificate  Certified Copy  Certified Co	Articles of Amendment and fee(s) are submitted for filing.  Sarah H. Lavelanet, Esq.    Name of Person	Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:  Sarah H. Lavelanet, Esq.  Name of Person  Shapiro, Blasi, Wasserman & Hermann, P.A.  Firm/Company  7777 Glades Road, Suite 400  Address  Boca Raton, FL 33434  City/State and Zip Code  jlandolfi@sbwh.law  E-mail address: (to be used for future annual report notification)  information concerning this matter, please call:  velanet, Esq.  Name of Person  Area Code  Daytime Telephone Number  Area Code  Certificate of Status  Certificate of Status  Certificate Copy  Certificate of Status

TO:

Registration Section

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company (A Florida Limited Liab	as it now appears on ou bility Company)	r records.)
The Articles of Organization for this Limited I Florida document number $\frac{1.16000150204}{1.0000150204}$	Liability Company wo	ere filed on <u>12/11/20</u>	20 and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, <u>enter the new name</u>	of the limited liabilit	y company here:	
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		<u>s_</u> 2
Principal office address MUST BE A STRE	ET ADDRESS)		2023 SE SECRE TALL
	-		
Enter new mailing address, if applicable:	-		SEE S 5
Mailing address MAY BE A POST OFFICE	<u>(BOX)</u>		
	-		<u> </u>
B. If amending the registered agent and/or		dress on our records	, enter the name of the new regi
gent and/or the new registered office addre	ess nere:		
Name of New Registered Agent:	Jose Caraballo		
New Registered Office Address:	1000 Holland Driv	ve, Suite 6	
*	<del></del>	Enter Florida stre	et address
	Boca Raton		, Florida <u>33487</u>
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

BELLO ESTATE MANAGEMENT, 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 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
MGR	Caraballo, Jose	1000 Holland Drive	
		Suite 6	□Remove
		Boca Raton, FL 33487	
			□Add
			□Remove 2022
			SECOLETAR:  TAILAILA
			SSEE.FL B
		<del> </del>	
			□Add
			□Remove
			□Add
			□Remove
			□Remove
			□Change

Effective date, if other than the date of filing:  (Optional)  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.  The effective date on the Department of State's records.  The 90th day after the ord is filed.  Dated  AUGUST 22  2023  Signature of a member or authorized representative of a member.		
Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 More: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed adocument's effective date on the Department of State's records.  The 90th day after the right of the statut of the s		
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Dated TMQMS1 22		earlier of: (b) The 90th day after the
	Dated AUGUST 22 2023	
Signature of a member or authorized representative of a member		
	Signature of a member or authorized representative of a me	ember
	Typed or printed name of signee	

Filing Fee: \$25.00