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A. RIVERS AUG 1 4 2023

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT:		LECHIC , LLC		
SUBJECT:	Name of Lin	lited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
		GEORGELYS NATAL		
		Name of Person		
		BELLECHIC, LLC		
		Firm/Company		
		11625 paige dr		
	***	Address	· · · · · · · · · · · · · · · · · · ·	
		Port richey, FL 34668		
	 	City/State and Zip Code		
	GEORGEI	GEORGELYSNATALVAZQUEZ@GMAIL.COM		
	E-mail address: (to be used for future annual report no	tification)	
For further information e	oncerning this matter, please c	all:		
GEORGELYS NATAL		407 617-1235 at ()		
Name of	f Person	Area Code Daytii	ne 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 Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, 1	Section orporations 7	Street Address: Registration Se Division of Co The Centre of	rporations	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BELLECHIC LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	ow appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were file	ed on 03/09/2017 and assigned
Florida document number L17000055540	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compan	ny," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	- 10 E5
	25 5
B. If amending the registered agent and/or registered office address of	on our records, enter the name of the new register
agent and/or the new registered office address here:	25 m
Name of New Registered Agent:	
New Registered Office Address:	
•	Enter Florida street address
	, Florida
City	Zin 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 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
MBR	NARCI Y VAZQUEZ CARRILLO	11625 PAIGE DR PORT RICHEY, FL 34668	□Add
			≡ Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
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	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 ack does not meet the applicable statutory filing requirements, this date will not be listed as
record specifies a delayed effective d is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
JUNE 28TH	2023
	Han I Mad
S	Signature of a member or authorized representative of a member
_	•
	GEORGELYS NATAL

Filing Fee: \$25.00