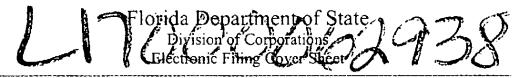
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180001954123)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INTERSTATE FILINGS LLC

Account Number : I20110000086 Phone : (718)569-2703 Fax Number : (718)504-7890

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: contact@interstatefilings.com

\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN B & S GLOBAL ADVISORS LLC

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\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

Fm:Interstate Filings LLC To:8 & S CLOBAL MOVISORS LLC ((H18000195412 3)))

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B & S GLOBAL ADVISORS LLC	
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number L17000062938	
This amendment is submitted to amend the following:	_
A. If amending name, enter the new name of the limit	ted liability company here:
The new name must be distinguishable and end with the words "Lim	nited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR.	(ESS)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	ED 8: 28
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	tered office address on our records, <u>enter the name of the neess here</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
Num Dunistanud Augusta Siaratana if akanaina Dunistana J	City Zip Code
New Registered Agent's Signature, if changing Registered	1 Agenc

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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	BELEGRIS BELEGRIS	2071 FLATBRUSH AVE STE	166 _□ <sub>Add</sub>
		BROOKLYN, NY 11:	234 Remove
MGRM	SEVASMIA BELEGRIS	2071 FLATBUSH AVE STE	Add
		BROOKLYN, NY 112	234_□ Remove
			Add
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			□ Add
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			Add
			Remove

n:Interstate Filings LLC To:B & S GLOBAL ADVISORS LLC ( ( ( H18000195412 D. If amending any other information, enter change(s) here:	11:57 07/03/18 ET Pg
D. If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)
	<del></del>
1. 1. Official and the state of	(ontional)
E. Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or file the date this document is filed by the Florida Department of State)	(optional) d date and cannot be more than 90 days after
Dated JULY 2 2018	
Tlan	
Signature of a member or author	zed representative of a member
ALEX ENGLARD	
Typed or printed	name of signee

Page 3 of 3