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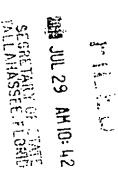
(Requestor's Name)	
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PICK-UP WAIT MAIL	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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COVER LETTER

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AND WOUND Registration Section TO: **Division of Corporations** BE HOME INTERNATIONAL LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: William Donizete Carvalho Name of Person BE HOME INTERNATIONAL LLC Firm/Company 4225, SUMMIT CREEK BLVD APTO 6210 Address ORLANDO, FL 32837 City/State and Zip Code William@by3studios.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: William D. Carvalho Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, □ \$30.00 Filing Fee & **\$25.00** Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

> MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BE HOME INTERNATIONAL LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited L	Liability Company)	多		
The Articles of Organization for this Limited Liability Company Florida document number L17000219600	were filed on	and assigned		
This amendment is submitted to amend the following:	Iment is submitted to amend the following: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the name of the limited liability company here: Inding name, enter the name of the limited liability company. Inding name of the limited liability company. Indiname here: Inding name, enter the name of the limited liability c			
A. If amending name, enter the new name of the limited liabi	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the ab	breviation "L.L.C."		
Enter new principal offices address, if applicable:	4225, SUMMIT CREEK BLVD APTO 6210			
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FI. 32837			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
	City	Zip Code		
Nam Desistand Agent's Signature if shanging Desistand Asset				

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

Title	<u>Name</u>	Address	Type of Action
MGR	Sarantopoulos, Jean	_	Type of Action
		2200 C 11141114 CODU	
<i>≒</i> #: `		3300 S. HIAWASSEE ROAD Suite 107. Orlando FL 32835	Remove
	Times Co. A		Change
MGR	Zingoni, Cintia		[] A.1.1
		5714 RIDGEWAY DR ORLANDO, FL 32819	Add
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ective date, if other than the effective date is listed, the date in eet. If the date inserted in this ament's effective date on the	block does not meet th	ie applicable stati	filing or more than 9 story filing require	(optional) 0 days after filing.) Pursu ments, this date will no	ant to 605.0 of be listed
record specifies a delay ne 90th day after the re	ed effective date, ecord is filed.	but not an ef	ective time, at	12:01 a.m. on th	e earlier
July 24	20:	19			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00