48000065233

(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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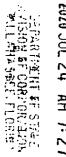


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COVER LETTER

TO: Registration S Division of Co			,
Offer Flori	da LLC ~		
3014BC1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Isac		
		Name of Person	
	Oxford Capital Holdings L	LC	
		Firm/Company	
	2519 McMuller Booth Roz	ad; Suite 510-286	
		Address	
	Clearwater, Florida 33761		
	isac@elite-homebuyers.con	City/State and Zip Code	
	=	to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Isac Bell		813 990-9159 at()	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Offer Florida LLC

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

(A Florida Limited Liability Company)

(A riona:	a Limited Diability Company)	근용성 규
The Articles of Organization for this Limited Liability C	Company were filed on 03/13/2018	and assigned
Florida document number L18000065233	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
Bell Property Group LLC		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
	· 	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
70. FG 19. 11. 12. 12. 12. 12. 12. 12. 12. 12. 12		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter</u>	the name of the new registe
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street addres	XX.
	, FI	orida
	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, 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>	Address	Type of Action
			□ Add
			□Remove
			□Change
			□Add
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			[] Change
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			🗆 Remove
			□Change

Page 2 of 3

ffective date, if other than the date of filing: 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 other; if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed occument's effective date on the Department of State's records. Be record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier. The 90th day after the record is filed. Signature of a member or authorized representative of a member.						
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Signature of a memori of authorized representative of a member			, ,	// //		
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Page 3 of 3