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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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COVER LETTER

	orporations		
Вес Весл	LLC		
SUBJECT:	Name of Lin	nted Liability Company	
The enclosed Articles o	of Amendment and feets) are sub	omitted for filling.	
Please return all corresp	ondence concerning this matter	to the following:	
	Tammy Yeatman		
	<u> </u>	Name of Person	
	Bec Beez LLC		
		LimeCompany	
	119 Silver Beach Ave		
		Address	
	Daytona Beach, FL 32118		
	tambo1957@gmail.com	City/State and Zip Code	
	F-mail address (to be used for future annual report	notification)
For further information	concerning this matter, please c	all:	
Taminy Yeatman		386 689 3430	
Name	of Person	at () Area Code Day	stime Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

l'allahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 266) Executive Center Circle Fallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Bee Beez LLC		
(Name of the Limited Liability C	Company as it now appears on our record mated Liability Company)	ds.,1
The Articles of Organization for this Limited Liability Com	npany were filed on	and assigned
Torida document number		
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited	l liability company here:	
he new name must be distinguishable and contain the words "Limited	Hability Company," the designation "LLC	" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	<u> </u>	
Principal office address MUST BE A STREET ADDRES	<u> </u>	18 18
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Control of the contro		७ ुर्दे
nter new mailing address, if applicable:		7
Mailing address MAY BE A POST OFFICE BOX)		
		Q 2.
 If amending the registered agent and/or registeregistered agent and/or the new registered office address 		is, <u>enter the name of the ne</u> v
Name of New Registered Agent:		
New Registered Office Address:		
THE TREE TREE TREE TREE TREE TREE TREE T		
	Enter Florida street addre:	11
		oridaZip Code

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
CEO AMBR	Tammy Yeatman	119 Silver Beach Ave	add
(Daytona Beach, FL32118	
			□ Change
			□ Remove
			☐ Change
			☐ Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
·····			
			□ Remove
			Change

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	5:
	
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	(optional) filing or more than 90 days after filing) Pursuant to 605 020
<u>Sote:</u> If the date inserted in this block does not meet the applicable statu ocument's effective date on the Department of State's records.	
acting a creen condition in the property of the condition in the condition	
e record specifies a delayed effective date, but not an effe	ective time, at 12:01 a.m. on the earlier o
The 90th day after the record is filed.	
July 02 2018	
Pated	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00