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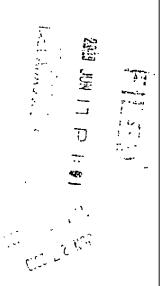
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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	Be Fire Safe			
SUBJE	2C1:		ited Liability Company	
The en	closed Articles of a	Amendment and fec(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Brian Rementer		
		Be Fire Safe LLC	Name of Person	
		5000 New Bedford Pl #100	Firm/Company	
		Winter Springs, FL 32708	Address	
			City/State and Zip Code	***
		E-mail address: (to be used for future annual report notifi	cation)
For fur	ther information co	oncerning this matter, please ca	all:	
Brian I	Rementer		864 867-8639 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:		
≅ \$25	5.00 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 ADDRESS:

TO:

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 Fire Safe LLC

(A Florida Limited I	Liability Company) 21.85 2011 7 1: 5:
The Articles of Organization for this Limited Liability Company Florida document number L18000262512	were filed on 11/08/2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5000 New Bedford PI #106
Principal office address MUST BE A STREET ADDRESS)	Winter Springs, FL 32708
Enter new mailing address, if applicable:	5000 New Bedford P1#106
Mailing address MAY BE A POST OFFICE BOX)	Winter Springs, FL 32708
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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

AGR = M	lanager Authorized Member		
<u>itle</u>	Name OBEKHOVA I VHOMVI A	Address	Type of Action
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		Winter Springs, FL 32708	Remove
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iR	Rementer, Brian		•
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		5000 New Bedford Pl #106 Winter Springs, FL 32708	
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fective date, if other than th	ne date of filing:		(optiona	ıl)
an effective date is listed, the date mote: If the date inserted in this	ust be specific and cannot be p	prior to date of filing or m	ore than 90 days after fili	ng.) Pursuant to 605.0203
cument's effective date on the	Department of State's reco	erds.	g requirements, uns da	te will not be fisted as
record specifies a delaye	ed effective date, but	not an effective t	ime, at 12:01 a.m	n. on the earlier o
Fb a 00th day - ft th	cord is filed.			
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The 90th day after the re	2019			
lune 14	, 2019	·		
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Filing Fee: \$25.00