## 118000 262681

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## COVER LETTER

TO: Registration S Division of Co	ection rporations			
	MES LLC			
SUBJECT:	Name of Lin	nited Liability Company		
	f Amendment and fee(s) are sub			
Please return all corresp	ondence concerning this matter	to the following:		
	Reinaldo Bello, Trustee			
	BELLO FAMILY TRUST	Name of Person		
		Firm/Company		~ ?
	1621 SW 126 Place			- ;
		Address		,
	Miami, Florida 33175			-
	reynaldobellolopez@yahoo			නි ව
The first of the section of		to be used for future annual report notifi	cation)	
Jerry Borbon, Esq.	concerning this matter, please c	305 595-3115		
	of Person	at () Area Code Daytime	Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 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 Sta Certified Copy (additional copy is en	itus &

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

AIME HOMES LLC		
( <u>Name of the Limited Liah</u> (A Flor	ollity Company as it now appears on our ida Limited Liability Company)	records.)
	Company were filed on November 8	3, 2018 and assigned
Florida document number L18000262681  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited 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 ADDRESS)		
This amendment is submitted to amend the following:	Articles of Organization for this Limited Liability Company were filed on November 8, 2018 and assigned da document number L18000262681  The amendment is submitted to amend the following:  The amending name, enter the new name of the limited liability company here:  The amendment is distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  The amendment is submitted to amend the following:  The amendment is submitted to a	
A. If amending name, enter the new name of the li	and document number L18000262681  mendment is submitted to amend the following:  mending name, enter the new name of the limited liability company here:  make must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C."  new principal offices address, if applicable:  ipal office address MUST BE A STREET ADDRESS)  new mailing address, if applicable:  ing address MAY BE A POST OFFICE BOX)  amending the registered agent and/or registered office address on our records, enter the name of the new red agent and/or the new registered office address here:	
The new name must be distinguishable and contain the words "L	imited 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 ADI	DRESS)	<b>57</b>
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	<u></u>	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
		cords, <u>enter the name of the new</u>
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

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>	<u>Address</u>	Type of Action
MGR	BELLO FAMILY TRUST	1621 SW 126 Place Miami, FL 33175	
			■ Remove
			Change
MGR	REINALDO BELLO	1621 SW 126 Place Miami, FL 33175	<b>=</b> Add
			Remove
			☐ Change
		<del> </del>	Remove.
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	Novemb	ber 8, 2018		
ffective date, if other th	an the date of filing: ate must be specific and cannot be p	prior to date of filing or more than	(optional)	NS 0203
lote: If the date inserted in	this block does not meet the ap the Department of State's reco	plicable statutory filing requir	rements, this date will not be li	sted as
e record specifies a d The 90th day after th	layed effective date, but e record is filed.	not an effective time, a	t 12:01 a.m. on the ear	lier o
	2018			
November 29				

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Typed or printed name of signee

Filing Fee: \$25.00