<u>18000282597</u>

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	
		MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	lv.



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TO:	<b>Registration Section</b>
	Division of Corporation:

Bella Vita Lusso 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:

Eric Valdes

Name of Person

Bella Vita Lusso LLC

Firm/Company

2875 S. Ocean Blvd Suite 202

Address

Palm Beach, FL 33480

Eric@BellaVitaLusso.Com

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUN 30 310 at (\_\_\_\_\_ Eric Valdes 910-9962 Daytime Telephone Number Name of Person Area Code 0 ډې Enclosed is a check for the following amount: en

■ \$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 Status & Certified Copy (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

Bella Vita Lusso LLC							
(Name of the Limi	ted Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)					
The Articles of Organization for this Limited L Florida document number <u>L18000282597</u>	• • •	were filed on <u>12/7/2018</u>	and	l assign	ed		
This amendment is submitted to amend the foll	owing:						
A. If amending name, enter the new name of	f the limited liah	<u>ility company here</u> :					
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLC" or the	abbrevistio	n "L.L.C			
Enter new principal offices address, if applic	able:	9465 Wilshire Blvd Suite 300					
(Principal office address MUST BE A STREET ADDRESS)		Beverly Hills, CA 90212					
Enter new mailing address, if applicable:		9465 Wilshire Blvd Suite 300					
(Mailing address MAY BE A POST OFFICE BOX)		Beverly Hills, CA 90212					
B. If amending the registered agent and registered agent and/or the new registered o	.,		<u>r the na</u>	<u>me of</u> 2019	the new		
Name of New Registered Agent:	Bolko & Assoc	iates LLC	; · <del>i</del>	E E	ية 3 <del>محير</del>		
New Registered Office Address:	1441 Forest Hi	ll Blvd Suite 100A		<u></u>	1		
	Enter Florida street address			9	T		

## 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.

City

West Palm Beach

If Changing Registered Agent, Signature of New Registered Agent

Florida 33

Zip.Code

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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

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<u>Title</u>	<u>Name</u>	Address	<b>Type of Action</b>
MGR	Eric Valdes	9465 Wilshire Blvd Suite 300	
; <del></del> _		Beverly Hills, CA 90212	🖬 Add
		Beveny mins, CA 70212	
			Change
MGR	Eric Valdes	15040 Ember Springs Circle Ste 2112	🗆 Add
		Orlando, FL 32821	
		<u> </u>	E Remove
			Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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	1/28/2019	. r	<u>_</u>
F ffective date	, if other than the date of filing: (optional)		
(If an effective date	e is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pu	irstant to 6	57)207 (3)(b)
Note: If the da	te inserted in this block does not meet the applicable statutory filing requirements, this date wil	I not be lis	ited as the
document s erro	ective date on the Department of State's records.		ю I
		<u>en:</u>	72
f the record sp	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on lay after the record is filed.	the earl	lier of:
b) The 90th d	lay after the record is filed.		
		(****) 32	<u>୧</u>
Dated			
T			
	Signature of a member or authorized representative of a member		
Eric	Valdes		
	Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00