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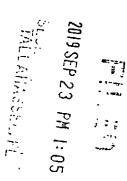
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SUBJ	ECI:	Name of Lim	ited Liability Comp	pany	
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The er	nclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please	return all correspor	ndence concerning this matter	to the following:		
		VICTORIA PRIETO MOR	RAES		
			Name of Pe	rson	
		ASSELFIS INTERNATIO	NAL LLC	1	
			Firm/Comp	any	
		7901 KINGSPOINTE PAR	RKWAY #10		
			Address	<u>!.</u>	
		ORLANDO FL - 32819			
		VICTORIA CIA SSEL EIS C	City/State and Z	ip Code	
		VICTORIA@ASSELFIS.C		e annual report noti	fication)
For fu	other information co	oncerning this matter, please ea			
		moething the matter, prease et		224 1024	
VICT	ORIA MORAES		407 at (826-1034	
	Name of	Person	Area C	ode Daytim	e Telephone Number
Enclo	sed is a check for th	e following amount:			
■ \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Fili Certified ((additional c		□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Division P.O. Bo	NG ADDRESS: ation Section in of Corporations ax 6327 ssee, FL 32314	F C 2	Registration Section Division of Corpor Clifton Building 1661 Executive Ce Fallahassee, FL 32	on rations enter Circle

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e to act in this capacity. I further agree to comply with performance of my duties, and I am familiar with and royided for in Chapter 605, F.S. Or, if this document address, I hereby confirm that the limited liability		
ing 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 Type of Action <u>Name</u> <u>Title</u> <u>Address</u> BETHEL INTERNATIONAL 7939 CORKFIELD AVE **AMBR** INVESTMENTS, LLC **⊟** Add ORLANDO, FL 32832 ☐ Remove _□ Change 7939 CORKFIELD AVE CELIO LEAL, ADRIANO **AMBR** □ Add ORLANDO, FL 32832 **■** Remove ☐ Change 12031 XENIA LANE **CELSO MORAES AMBR ■** Add ORLANDO FL - 32827 ☐ Remove □ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

D. If amending any other info		- `			
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E. Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in the document's effective date on the second	e must be specific and nis block does not n	cannot be prior to date neet the applicable st	of filing or more that the state of the stat	optiona (optiona) on 90 days after fili	ng.) Pursuant to 605.0207
If the record specifies a del (b) The 90th day after the			 effective time	e, at 12:01 a.m	n. on the earlier of
SEPTEMBER 17		2019			
		,			
	Signature of a 1	member or authorized r	epresentative of a	member	_ .
CELSO MORAES		_			
		Typed or printed nam	l n n Culoma i		

Page 3 of 3

Filing Fee: \$25.00