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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2020 MAY 13 AM 10:05

*Amended*

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Bellamyn, LLC

\_\_\_\_\_  
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:

Mercedes Flores

\_\_\_\_\_  
Name of Person

Bellamyn, LLC

\_\_\_\_\_  
Firm/Company

141 NW 20th St, Suite G1

\_\_\_\_\_  
Address

Boca Raton, FL 33431

\_\_\_\_\_  
City/State and Zip Code

mercedes@bellamyn.com

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

For further information concerning this matter, please call:

Mercedes flores

302 307-3000  
at ( )  
Area Code Daytime Telephone Number

\_\_\_\_\_  
Name of Person

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Bellamyn, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on January 8, 2020 and assigned  
Florida document number L20000015130.

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)**

141 NW 20th St.

Suite G1

Boca Raton, FL. 33431

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

141 NW 20th St.

Suite G1

Boca Raton, FL. 33431

2020 MAY 13 AM 10:05

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Mercedes Flores

New Registered Office Address:

141 NW 20th St., Suite G1

*Enter Florida street address*

Boca Raton

*City*

Florida 33431

*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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Cynthia Cabrera	925 NE 4th CT	<input type="checkbox"/> Add
		Hallandale Beach, FL 33009	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mercedes Flores	141 NW 20th St.	<input checked="" type="checkbox"/> Add
		Suite G1	<input type="checkbox"/> Remove
		Boca Raton, FL 33431	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated April 22, 2020

Mercedes Flores

MERCEDES FLORES

Typed or printed name of signee