## K21000219291

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## **COVER LETTER**

TO:	Registration Sec Division of Corp		•	•			
SUBJEC		HOUSE LLC		•			
SOBJE	C1.	Name of Lin	nited Liability Company	<del></del>			
The encl	losed Articles of A	mendment and fee(s) are sub	emitted for filing.				
Please re	eturn all correspon	dence concerning this matter	to the following:				
			Name of Person				
		RS ACCOUNT	ING AND TAX SERVICES INC				
	Firm/Company						
		10 FAIRW	/AY DRIVE SUITE 226				
			Address				
		DEÈ	RFIELD BEACH, FL 33441				
			City/State and Zip Code	<del></del>			
			fo@rsaccountingtax.com				
		E-mail address: (	to be used for future annual report no	otification)	0		
For furth	ner information con	ncerning this matter, please o	all:		·021		
RODRI	GO P SILVA		954 218-6509 at ( )	·	2021 JUN		
	Name of	Person		me Telephone Number			
Enclosed	1 is a check for the	following amount:			A D		
<b>≡</b> \$25.	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing I Certificate of Certified Copy (additional copy)	Status &		
	Mailing Address:		Street Address:				

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

	BELI BEL	THOUSE LLC	
(Name of the Lin	nited Liability Con (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
he Articles of Organization for this Limited	Liability Compa	ny were filed on 05/11/2021	and assigned
lorida document number L21000219291	<u> </u>		
(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   [200021929]  This amendment is submitted to amend the following:  If amending name, enter the new name of the limited liability company here:  ONE  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" on the abbreviation "LLC" on the abbreviation of the limited liability Company of the designation of the abbreviation "LLC" on the abbreviation of the limited liability Company of the designation of the abbreviation of the limited liability Company of the designation of the abbreviation of the limited liability Company of the designation of the abbreviation of the limited liability Company of the designation of the abbreviation of the limited liability Company of the designation of the limited liability Company." The designation of the abbreviation of the limited liability Company of the limited liabilit			
ONE			
ne new name must be distinguishable and contain the	words "Limited Li	ability Company," the designation "LLC" or the ab	obreviation "L.L.C."
nter new principal offices address, if appl	icable:	NONE	
* *			
•			
			7.,
nter new mailing address, if applicable:		NONE	
<u> Iailing address MAY BE A POST OFFICE</u>	E BOX)		
If amending the registered agent and/or	registered offic	e address on our records, enter the nam	e of the new regist
tent and/or the new registered office addr	<u>ess here</u> :		2021
Name of New Degistered Assess	NONE		
Maine of New Registered Agent;	<del></del> -		<u>-</u>
New Registered Office Address:	NONE	F OF THE STATE OF	
		f.mer Florida street address	A
		, Florida	Zip Ade
		City	Zip <b>(∑</b> de

## 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>	Type of Action
AMBR	CASTRO BENDER, CAROLINA	10 FAIRWAY DRIVE SUITE 226 DEERFIEL	.D BEA
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		<u>.</u>			-			_
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cord specifies a delayed effec s filed.	etive date, but i	not an effect	tive time, a	t 12:01 a.m.	on the earlie	erof:(b) T	The 90th day	after the
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Filing Fee: \$25.00