

(Ke	questor's Name)	
(Ad	dress)	
(Ad	ldress)	<u>.</u>
(/ 10	a1033)	
(Cit	ry/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	-	
(Bu	siness Entity Name)	
(Do	curnent Number)	
Cartified Conies	Cartificator of St	tatus
Certified Copies	_ Certificates of Si	.atus
Special Instructions to	Filing Officer:	
	· ····· 3 - ····	
	00011	
	Office Use Only	9129 5, C.
		/ 11d 1
	<	5,(').
	_	<i>_</i>



09:20:01--01093--097 *+60.00

COVER LETTER

TO: Registration Sec Division of Cor		2.4	
SUBJECT: Bea		L Corper Proper	ties LLC.
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Claud	lia Valde 2	2
	Beaver	Suit LLC Firm/Company	<u>Selfowned</u> with
	1929	Rivergate Address	Que
	Temple Toeaver by E-mail address:	City/State and Zip Code Lit + O + O + C to be used for future annual report notifi	L33637 Hics@gmail.com
For further information of	oncerning this matter, please o	all:	
Claudia Name of	Valde Z	at (<u>J3</u>) 71 Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C	ection orporations	Street Address: Registration Sec	porations
P.O. Box 632 Tallahassee, F		The Centre of Ta 2415 N. Monroe	allahassee e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

mited Liability Company as it now appears on our record
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 8/30/202/Florida document number _ 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the ne agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

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

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 Name Type of Action MGR Claudia Valdez 10929 Rivergate aventado Temple Terrace, FZ 33637 mar Jason Bochinski _ Remove □ Change □Remove ☐ Change _____ □ Add □ Remove

☐ Change

	
	$\mathbb{N} \setminus \mathbb{N} \setminus \mathbb{N}$
_	
	
Fffactive	e date if other than the date of filing:
i an effect	ive 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
document	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
	t's effective date on the Department of State's records.
e record s	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	9-17 2021
	Manda Illall
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

ET CALA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ame of the Limited Liability Company as it now appears by our record
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 8/30/302 and assigned Florida document number 12/00038041This 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address 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>	Address	Type of Action
MGR	Claudia bldez	- 10929 Rivergate au	L. DAdd
		10929 Rivergate au Temple Tempace, FZ	93637 □Remove
MGR	Jascin Bochinst	, Same-1	□Change
			□ Remove
			□ Add
			Пстюуе
			© Change
		-	— □Add □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
			AH Changes
			□ Remove
			Change
			□Add
			□Remove
			□Change

amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
	N ==	=
	THE P	Site
	_ <u> </u>	行びた
Effective date, if other than the date of filing: (optional) (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.) Put Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not a specific and cannot be prior to date of filing or more than 90 days after filing.) Put Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not provide the provide of State's proords.	rsuant to 605.0 I norther listed	1207 Has
document's effective date on the Department of State 3 recovers		
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 9 cord is filed.	on day aner	enc -
9-17 2021		
Dated		
Signature of a member or authorized representative of a member		