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COVER LETTER

TO:

Registration Section Division of Corporations

| BELLA T | ERRA I LLC | | | | |
|---|--|--|--|-----------------|--|
| 30bate 1. | Name of Lim | nited Liability Company | | | |
| The enclosed Articles o | f Amendment and fee(s) are sub | omitted for filing. | | | |
| Please return all corresp | ondence concerning this matter | to the following: | | | |
| | ANTHONY NGO | | | | |
| | | Name of Person | | _ | |
| | UNIFIED LEGAL GROU | P. P.A. | | | |
| | | Firm/Company | - | | |
| 941 WEST MORSE BOULEVARD, SUITE 100 | | | | | |
| Address | | | | | |
| WINTER PARK, FL 32789 | | | | | |
| City/State and Zip Code | | | | | |
| | ANTHONY@UNIFIEDLE | EGALGROUP.COM | | <u>~;</u> | |
| | E-mait address: (| to be used for future annual report notif | fication) | ري دے | |
| For further information | concerning this matter, please c | all: | | 72 | |
| ANTHONY NGO | | 4()7 476-338() at () | 15 FE F8 | | |
| Name | of Person | | c Telephone Numbe | ` ' | |
| Enclosed is a check for | the following amount: | | | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified | ite of Status & | |
| Mailing Address Registration Division of 0 P.O. Box 63 Tallahassee, | Section Corporations 27 | Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroo Tallahassee, FL | porations allahassee e Street, Suite 8 | 310 | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BELLA TERRA 1, 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 $\frac{4/13/2023}{1}$ and assigned Florida document number <u>L23000184708</u> 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." 4830 W. KENNEDY BLVD Enter new principal offices address, if applicable: SUITE 600 (Principal office address MUST BE A STREET ADDRESS) TAMPA, FL 33609 4830 W. KENNEDY BLVD Enter new mailing address, if applicable: SUITE 600 (Mailing address MAY BE A POST OFFICE BOX) O TAMPA, FL 33609 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.

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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| amendin | g any other information | n, enter ch | nange(s) her | e: <i>(Attach ade</i> | ditional sheets, | if necessa | ry.) | |
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Filing Fee: \$25.00