L23000321316

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COVER LETTER

Registration Section Division of Corporations

TO:

Add an age	ent name in Belou LLC and cha	inge the Address	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Benite Belfort		
	 -	Name of Person	
	Belou LLC		
		Firm/Company	
	2181 Lakeview Dr 209		
	4 = .	Address	· · · · · · · · · · · · · · · · · · ·
	Sebring, FL 33870		
		City/State and Zip Code	
	belou675@gmail.com		<u> </u>
	E-mail address: (to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
Benite Belfort		772 301-5858 at ()	
Name of Person		Area Code Daytin	ne Telephone Number
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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Se Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Belou LLC					
(Name of the Limi	ted Liability Comp. (A Florida Limited	any as it now appears on our Liability Company)	<u>r records.</u>)		
The Articles of Organization for this Limited L. lorida document number L23000321316.	iability Company	were filed on 07/06/202.	and assigned		
This amendment is submitted to amend the fol-	lowing:				
a. If amending name, enter the new name o	of the <u>limited lial</u>	pility company here:			
he new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation	on "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if appli	cable:	619 N Ridgewood Dr. Sebring, FL 33870			
Principal office address MUST BE A STRE	ET ADDRESS)				
		P.O. Box 1223			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Sebring, FL 33871			
3. If amending the registered agent and/or agent and/or the new registered office addre	registered office	address on our records	, enter the name of the new regis		
Name of New Registered Agent:		and Renald Duverlien			
New Registered Office Address:	Same				
	Enter Florida street address				
		, Florida Zip Code			
and the second s	Danistana d Lane	,	Lip Coll		
New Registered Agent's Signature, if changing		<u>:</u>	·		
I hereby accept the appointment as register	red agent and ag	ree to act in this capaci	ty. I further agree to comply wi		

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	Renald Duverlien	2181 Lakeview Dr Apt 209, Sebring, FL 33870	= Add
			□Remove
			□Change
			□Adđ
			□Remove
			□ Change
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ffective date	, if other than	the date of fi	ling:	prior to date of	filing or more th	optic	onal) filing.) Pursuant to	605 0207
<u>lote:</u> If the d	ite inserted in thi	is block does n	ot meet the a	pplicable statu	nory filing rec	purements, this	date will not be	listed as
neument's ef	ective date on th	e Department	of State's rec	ords.				
						1. 6.41	V 221 - DO-E 1	، باد ساد ساد
record specit Lis filed.	es a delayed effe	ctive date, but	not an effect	ive time, at 12	::U1 a.m. on tr	ie earmer of: (D) The 90th day :	iner me
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Filing Fee: \$25.00