

From:

Account Name : BAKER & MCKEN2IE Account Number : 074222002135 Phone : (305)789-8900 Fax Number : (305)789-8953

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

### COR AMND/RESTATE/CORRECT OR O/D RESIGN BEL GP. INC.



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BEL GP, INC.			ARY OF STATE
(Name of Corporation as cur	rently filed with the	lorida Dept. of S	tate)
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· (Document Nu	unber of Corporation (	if known)	
Pursuant to the provisions of section 607.1006	6, Plorida Statutes, this	Florida Profit Co	prporation adopts the following amend
its Articles of Incorporation:			
A. If amending name, enter the new name	of the corporation:		
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered." "professional association,	n "Corp," "Inc," or	'Co". A professi "P.A."	onal corporation name must contain t
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>			ckell Avenue
(Trincipul office waterss <u>most of ASTRE</u>	<u>E1 AUQUESS</u> )	18th Floor	
		Miami, F	lorida 33131
C. <u>Euter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		1200 Bri	ALCH ALLAND
		1200 011	ckell Avenue
		18th Flo	
		18th Flo	
(Mailing address <u>MAY BE A POST OFF</u> D. <u>If amending the registered agent and/or</u>	<u>TCE BOX</u> ) : <u>cegistered office <del>y</del>dd</u>	18th Flow Miarni, F	or Iorida 33131
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# If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

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P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones. V as Remove, and Sally Smith, SV as an Add, Example:

X_Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>\$Y</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
l) Change	PD	Thomas Faure	1200 Brickell Avenue
X Add			18th Floor
Remove			Miami, FL 33131
2) Change	PD	Claudio Crotta	201 S. Biscayne Blvd
Add			Suite 2800
X Remove			Miami, FL 33131
3) Change			
Add			
Remove			
4) Change			
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Remove			
5) Change			·····
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ffective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were at	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement e each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
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action was not required.	opted by the board of directors without shareholder action and shareholder
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