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(Re	questor's Name)	
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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

JUN - 2 2009

EXAMINER

COVER LETTER

	ration Secti on of Corpo				·	
SUBJECT:		Eyeview Pre	ess and Des			
		nendment and fee(s) are su	_			
Please return all	correspond	ence concerning this matte	er to the following	:		
			Miguel Herr			
			Firm/Comp	pany		
6116 Lokey Drive						
	,		Address	S		•
			Orlando, FL			_
			City/State and 2	Zip Code		
	-	E-mail address:	(to be used for futur	re annual report notifi	cation)	
For further infor	mation cond	erning this matter, please	call:			
		Hernandez	at (_32		303-4422	
	Name of Po	erson	,	Area Code & Daytimo	e Telephone Numbe	er -
Enclosed is a ch	eck for the f	ollowing amount:				
₹25.00 Filing	g Fee [\$30.00 Filing Fee & Certificate of Status	\$55.00 Fili Certified (addition) Certifie	ate of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	n ations nter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Eyeview Press and [Design, LLC			
(Name of the Limited Liability Company as (A Florida Limited Liabili	it now appears of ty Company)	n our records.)		
The Articles of Organization for this Limited Liability Company were	filed on	5/20/09	_ and assig	ned
Florida document numberL0900049225				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liability (</u>	company here:			
Eyeview Marketing	g, LLC			
The new name must be distinguishable and end with the words "Limited Li 'L.L.C."	ability Company,	the designation "LLC"	or the abl	
Enter new principal offices address, if applicable:			09	SE
(Principal office address MUST BE A STREET ADDRESS)				02.55 02.55 0.55 0.55 0.55 0.55 0.55 0.5
				OF RE
			PH	FD ORPORA
Enter new mailing address, if applicable:				ORA ORA
(Mailing address MAY BE A POST OFFICE BOX)			58	
_				
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	address on our	records, enter the	name of	the new
Name of New Registered Agent:				
New Registered Office Address:			· · · · · · · · · · · · · · · · · · ·	
	Enter	Florida street addres	S	
		, Florida	<u> </u>	
Ciţ	y	•	Zip Code	

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, ent	er change(s) here: (Attach additional sheets, if necessary.) 2009	SECRETARY OF STATE DIVISION OF CORPORATIONS OP JUN -1 PH 1:58
Dated	foring H	a member or authorized representative of a member	
	y Systemate of	Yaribell Hernandez Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00