L1000095504

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HAZMAT MENLLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
WILLIAM SHANE WRIGHT Name of Person	
HAZMAT MEN LLC	
Firm/Company	
G900 DANIELS PKWY 29-315	
FORT MYERS FL. 33913 City/State and Zip Code	
INFRARED EYES HOME WATCH GGMA)L.COME-mail address: (to be used for future annual report notification)	2013 DEC 11 AM ÜK 05
For further information concerning this matter, please call:	
	10 cm 200
WILLIAM SHANE URIGHT at (239) 707-3357	
Name of Person Area Code & Daytime Telephone Number	# 05
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified	te of Status &

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HAZMAT M	EN LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now app Limited Liability Company	ears on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on _	4-28-13	and assigned
Florida document number <u>L10000095504</u>	 •		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) ization for this Limited Liability Company were filed on		
INFRARED EYES	LLC		8188 ·
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Con	npany," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	<u>PRESS)</u>		
			1177
Enter new mailing address, if applicable:			- 100 - 100
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office ad		n our records, <u>ente</u>	r the name of the new
Name of New Registered Agent:			
New Registered Office Address:	ing: he limited Liability Company ing: he limited Liability company here: S LLC he words "Limited Liability Company," the designation "LLC" or the abbreviation he words "Limited Liability Company," the designation "LLC" or the abbreviation here: ADDRESS) registered office address on our records, enter the name of the new here address here: Enter Florida street address Florida		
		Enter Florida street d	ıddress
<u> </u>	,	, Florida	
	City		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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

Title	Name	Address <u>T</u>	ype of Action
MGR	JUNAH HERDOIZA	6900 DANIELS PARKWAY 29-315	Add
		FORT MYERS FL. 33912	
			Add
			Remove
		200 5 00 5 00 5 00 5 00 5 00 5 00 5 00 5	728 Add -
		- (17) を (3) (2) (2) (2)	Remove
		<u>소요</u> 유민	Add
			Remove
			Add
			Remove
			Add
			Remove

If amending ar	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
ed	· · · · · · · · · · · · · · · · · · ·
	Signature of a member or authorized representative of a member
	WILLIAM SHANE WRIGHT
	Typed or printed name of signee
	Dogg 2 of 2

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Filing Fee: \$25.00

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