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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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08/16/13--01015--017 \*\*30.00



## **COVER LETTER**

TO: Registration Section Division of Corporations

Millionaire Blueprints Media LLC

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:

Marlene Green		•	
Name of Person	_		
Firm/Company	_		
9145 Narcoossee Road, Suite 106-188	3		
Address	<del>-</del>		
Orlando, Florida 32827	,,;··.		
City/State and Zip Code	<sup>±</sup> iji°i⊒ ≯or		
marlenegreen247@gmail.com	Eg	دن چد	्रभाग
E-mail address: (to be used for future annual report notification)		AUG	is seeming
For further information concerning this matter, please call:	SSE VENT	5	ii Haren
Marlene Green 201,3331692	E S		A CONTRACTOR
Name of Person Area Code & Daytime Telephone Num	DRID DRID	. მვ	A MARCO

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)

□\$60.00 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Millionaire Blueprints Media LLC	·	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records. Liability Company)	)
The Articles of Organization for this Limited Liability Company Florida document number <u>L11000097634</u>	were filed on April 16, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Fresh Eyes Business Solutions LLC	·	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	9145 Narcoossee Road	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	Suite 106-188	* A SE 3
	Orlando, Florida 32827	ASS AND
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	9145 Narcoossee Road Suite 106-188	ASSEE FLOOR
•	Orlando, Florida 32827	<u>2</u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ter the name of the new
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida stree	t address
	, Florid	
	City	Zip Code

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 Type of Action · Address **Title** <u>Name</u> Remove estarea. Remove Remove

•	· · · · · · · · · · · · · · · · · · ·
•	
Dated	Signature of a member or authorized representative of a member of Marlene Green, Manager  Typed or printed name of signee

Filing Fee: \$25.00