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	Division of Corp	CALENDAR Sunbiz.org Payment				
SUBJ	comp Sight	Beyond Wha	t I See et span	Actions		
501 0	ECT.	Name of Lin	nited Liability Company			
The en	nclosed Articles of A	Amendment and fee(s) are su	omitted for filing.			
Please	return all correspor	idence concerning this matter	r to the following:			
		Amos Lund	y,Jr.			
			Name of Person			
		Sight Beyor	nd What I See			
			Firm/Company			
		798 SW Do	rchester Street	t		
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		amoslundy@bel E-mail address:	ISOUIN.NEL (to be used for future annual report	notification)	R P	3 ************************************
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An	nos Lund	y, Jr.	_{at} 772 _, 873	-9382	PH I: 14	-
	Name of	Person	Area Code Da	ytime Telephone Number		
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■ \$ 2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT

TO ARTICLES OF ORGANIZATION Search Web T Hi, Amos

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INBOX CONTACTS CAL	ENDAR Sunbiz.org Payment						
Compose	Deleto	Move	Spem	Actions			
	(Name of the Limited	Liability Company as i	t now appea	rs on our re	cords.)		_
	(A	Florida Limited Liabilit	y Company)				
e Articles of Organization	for this Limited Liab	oility Company were	filed on 3	/26/14		and	assigned
orida document number L			_				Ü
		•					
is amendment is submitted	to amend the follow	'mg:					
If amending name, ente	r the new name of t	he limited liability c	ompany h	ere:			
e new name must be distinguish	able and end with the wo	rds "Limited Liability Co	ompany," th	e designation	"LLC" or the	abbreviatio	na "L.L.C."
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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 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

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Ma	mager Shirl	ey Ann Lund (Search Mail Search	h Web 🔃 Hi, Amos
INBOX	CONTACTS CALENDAR Sunbizorg Payment	Amos Lundy, Jr.	
	Name Octoro	Address Spam Actions	Type of Action
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	•	Port-St. Lucie Fla. 3498	Remove
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Her address is: 798 SW D	orchecter Street Port Sai	nt Lucio Florida 3	4083 ·
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