L15000156066

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November 27, 2018

BARB BITTNER 102 HARRIS BLVD INDIALANTIC, FL 32903

SUBJECT: THE OAKLEY LENS LLC

Ref. Number: L15000156066

We have received your document for THE OAKLEY LENS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Letter Number: 118A00024133

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: The Oakley Lens LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filling.	
Please return all correspondence concerning this matter to the following:	
Barb Bitther Name of Person	
The Oakley Lens Luc	
102 Harris BIVd	
IND F1 32903	
City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zi	See BEC
For further information concerning this matter, please call:	1 F
Barb Bi Haec at (321) 960-1846 Name of Person at (321) Area Code Daytime Telephone Number	AN IO: VL
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified C	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

The Oc	akley Lens L	LC		
(Name of the Limited I	Jiability Company as it now appear Florida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liabi Florida document number <u>L1500015</u>		9/14/201	<u>S</u> and assigned	
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the Bi++ ne of The new name must be distinguishable and contain the words	· Studio 1	-L-C	bbreviation "L.L.C."	_
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	DDRESS) 100		B179 32903	<u> </u>
Enter new mailing address, if applicable:				_
(Mailing address MAY BE A POST OFFICE BO.			s Blud	_
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	registered office address on	Our records, enter	O of the Land III AM ID:	Hew To To To To
New Registered Office Address:	i O Q Enter Flor	Harris B	₹ø¢	_
	TND	Florida	32403 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 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.

f Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MUR	Barbara & Bittner	122 Harris Blud	Add
	Bithnesey	INO F1 32403	Remove
			Change
			🗖 Add
			Remove
			□ Change
MUR	Barbara	102 Harris Blud	
	Bitther	IND F1 32903	Some Some
		IND F1 32903	Change
			
			
			Change
-			
			Remove
			Change
			□ Add
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. 11 ann	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Note:	ive date, if other than the date of filing:	0207 (3)(d as the
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.	r of:
Dated	Dec 15 2018	
	430 Bett Og	
	Signature of a member or softhorized representative of a member	
	139cb 131-the Oakley Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00