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DEPARTMENT OF STATE

SECRETARY OF STATE

APR 26 AM A:

K. SALY APR 27 2017

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Clear Vision Group	, LLC			
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				Art of Inc. File
]	LTD Partnership File
•				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
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				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
			✓	Photo Copy
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				Certificate of Status
				Certificate of Fictitious Name
			<u> </u>	Corp Record Search
				Officer Search
				Fictitious Search
Signature	····			Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
Requested by: BA	1/26/17			UCC 1 or 3 File
Nama	$\frac{4/26/17}{Data}$	Time		UCC 11 Search
Name	Date	rime		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2017 APR 26 AM 8: 12

IALLAHASSEE, FLORIDA

Clear Vision Group, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on April 4, 2017	and assigned		
Florida document number L17000076673				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:	,		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" of	the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1515 N. Federal Highway			
(Principal office address MUST BE A STREET ADDRESS)	Suite 300			
	Boca Raton, FL 33432			
Enter new mailing address, if applicable:	1515 N. Federal Highway			
(Mailing address MAY BE A POST OFFICE BOX)	Suite 300			
	Boca Raton, FL 33432			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address here. Name of New Registered Agent:		enter the name of the new		
New Registered Office Address:	Enter Florida street address			
	City, Flor	ida Zip Code		
New Registered Agent's Signature, if changing Registered Agent	•	Lip com		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	- ree to act in this capacity. I furti			

If 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>	<u>Address</u>	Type of Action
MGR	Josh Ravit	1515 N. Federal Highway	Add .
		Suite 300	□ Remove
		Boca Raton, FL 33432	■ Change
			Remove
			☐ Change
			
			☐ Remove
			Remove TALLAHASSEE
			DRATE NO.
			□ Change
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			☐ Remove
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Effective date, if other than the date of filing: fan effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020' Note; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The effective date and the defective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed. Signature of a member or authorized representative of a member								
Effective date, if other than the date of filing:	_							<u>~</u>
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Page 3 of 3

Filing Fee: \$25.00