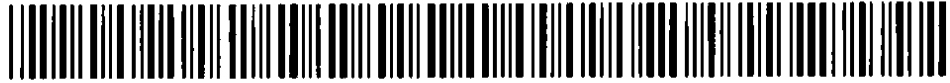


Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

418000076965

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000406992 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

2022 DEC -2 AM 9:52
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
3RD EYE VIEW, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00 C.

BRUMBLEY
DEC - 5 2022

Electronic Filing Menu

Corporate Filing Menu

Help

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

3rd Eye View, LLC

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

SECRETARY OF STATE
TALLAHASSEE, FL

2022 DEC 2 AM 9:52

FILED

The Articles of Organization for this Limited Liability Company were filed on 03/26/18 and assigned
Florida document number L18000076965

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2885 40th Avenue North

St. Petersburg, FL 33714

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2885 40th Avenue North

St. Petersburg, FL 33714

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City Florida 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.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an 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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Riley Park
Signature of a member or authorized representative of a member

Riley Park

Filing Fee: \$25.00