## 119000073483

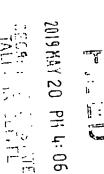
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## **COVER LETTER**

	Registration S Division of Co					
SUBJEC		VISION OPTICAL LLC				
SUBJEC	.1	Name of Lim	uted Liability Company			
		f Amendment and fee(s) are sub	-			
Please re	turn all corresp	ondence concerning this matter	to the following:			
		WENDY PEREZ				
			Name of Person			
			Firm/Company			
		11455 SW 40TH ST, 154				
			Address			
		MIAMI, FLORIDA 33165	5			
			City/State and Zip Code			
		arianavisionoptical@gmail.				
		E-mail address: (	to be used for future annual report notifi	ication)		
For furth	er information	concerning this matter, please c	all:			
Wendy I	<sup>3</sup> erez		786 209-5158			
	Name	of Person	Area Code Daytime	Telephone Number		
Englosed	is a check for	the following amount:				
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		

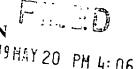
MAILING ADDRESS:

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**



	OF	2019 HAY 20	PM 4: 06	
ARIANAVISION OPTICAL LLC		OS OBT	The state of the s	
ARIANAVISION OPTICAL LLC (Name of the Limited Liabilit (A Florida	y Company as it now a Limited Liability Compa	opears on our records.)	<u> </u>	
The Articles of Organization for this Limited Liability Corolida document number L19000073483	ompany were filed or	March 15, 2019	and assigned	
	<u> </u>			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ted liability compar	ıv here:		
The new name must be distinguishable and contain the words "Limi	ited 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 ADDR	<u>ESS)</u>			
	-			
r				
Enter new mailing address, if applicable:	-			
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or regist registered agent and/or the new registered office additions.		s on our records, <u>s</u>	nter the name of the ne	
	<del></del> -			
Name of New Registered Agent:				
New Registered Office Address:				
_	Enter Florida street address			
	City	, Florid	la	
New Registered Agent's Signature, if changing Registered	•		Zip Code	
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and confidence to accept the obligations of my position as registered agent of the proper and confidence to the obligations of the proper and confidence in the registered agent the description of this change.	and agree to act in i complete performanc gent as provided for	e of my duties, and I in Chapter 605, F.S	am familiar with and C. Or, if this document is	

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	WENDY A. PEREZ	11455 SW 40TH ST, 154 MIAMI FL. 33165	Add
			■ Remove
			□ Change
MGR	WENDY PEREZ	11455 SW 40TH ST, 154 MIAMI FL. 33165	■ Add
			☐ Remove
			Change
			Add
			Remove
			Change
			□ Add
			☐ Remove
			Change
			Add
			Remove
			☐ Change
<del></del>			
			□ Remove
			Change

If amending any other inform	ation, enter change(s) here:	(Attach additional shee	's, if necessary.)	
	<del></del>			
		***		
-				
	<u> </u>	<del></del> .		
	<u></u>			
Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific and cannot be prior to block does not meet the applicab	date of filing or more than 90	(optional) days after filing.) Pursuant to 605.02 ments, this date will not be listed a	07   as (
e record specifies a delay The 90th day after the re		an effective time, at	12:01 a.m. on the earlier	of
Dated	2019			
11/2.20	Signature of a member or authorize			
- crece	Signature of a member or authoriz	zed representative of a memb	er	
Wendy Perez				
	Typed or printed	name of signee	<del></del>	

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