## L19000085479

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

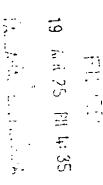
Office Use Only



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MAY 0 8 2019 S. YOUNG



## **COVER LETTER**

TO:	Registration Se Division of Cor			
eno in	UAS Soluti			
SUBJE	CI:		nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Dean Attridge		
			Name of Person	<del> </del>
		UAS Solutions LLC		
			Firm/Company	<del></del>
		9924 Cross Pine Court		
		<del></del>	Address	
		Lake Worth, FL, 33467		
		deanattridge@gmail.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please c	all:	
Dean A	Attridge		702 755 9825 at ( )	
	Name o	f Person		Telephone Number
Enclose	ed is a check for th	ne following amount:		
<b>■ \$2</b> 5	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 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

UAS Solutions LLC		
( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our record a Limited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability C	Company were filed on 01 April 2019	and assigned
Florida document number L19000085479		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
Eagle Eye Innovations LLC		
he new name must be distinguishable and contain the words "Lim	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 ADDI	RESS)	:: 5 :: 5
	\	12
Enter new mailing address, if applicable:		ີ ປາ
~		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
		<u>. (9</u>
<ol> <li>If amending the registered agent and/or regis egistered agent and/or the new registered office add</li> </ol>		s, enter the name of the i
Name of New Registered Agent:		
New Registered Office Address:	F . Cl	
	Enter Florida street addres.	S
		orida
	City	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

## 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
MGR	Dean Attruidge	9924 Cross Pine Court, Lake Worth, FL 33467	<b>A</b> dd
			□ Remove
			Change
AR	Dean Attridge	9924 Cross Pine Court, Lake Worth, FL 33467	Add
			Remove
			□ Change
			□ Remove
			☐ Change
			Add
			Remove
			Change
	<del></del>		
			Remove
			Change
			□ Add
			Remove
			Change

	ame Change of LLC
Cl	nange of AR Dean Attridge to MBR Dean Attridge due to filing error
	<u> </u>
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-	
_	
_	
_	
ctiv	re date, if other than the date of filing:
<u>e:</u> I	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed nt's effective date on the Department of State's records.
	is a street, we date on the Bepartment of State 3 feededs.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie
ne s	90th day after the record is filed.
•d	4/21/19
-u _	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00