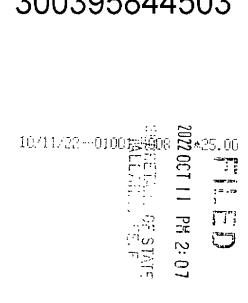
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(Requestor's Name)	
(Address)	
(Address)	
(12.22)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	

Office Use Only



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A. BUTLER OCT 1 1 2022

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Anutha GENUE Name of Limited Lin	S EyeDea, LLC
The enclosed Articles of Amendment and fee(s) are submitted. Please return all correspondence concerning this matter to the	
Please return all correspondence concerning this maker to the	
Anthonyl	Name of Person
	Firm/Company
13822 CRAT	TER CIRCLE Address
HUDSON, FL	34669—11.81. ty/State and Zip Code
anutabenie E-mail address: (u) be	SEVEDEZ DON JIL. COM used for Juture annual report notification)
For further information concerning this matter, please call:	
Anthony L. Brown, SR.	at (727) & 19-3219 Area Code Daytime Telephone Number
Enclosed is a cheek for the following amount:	TI \$55.00 Filing Fee & S60.00 Filing Fee.
✓ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Street Address:
Mailing Address: Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32314

2415 N. Monroe Street, Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF 2022 OCT 11 PM 2: 11 TOUTE FOR NET INC

Anotha DENYES EVEL	ny as it pow appears on ou	r records Dia
(Name of the Limited Liability Compa (A Florida Limited I	lability Company)	TALLAH) STATE
The Articles of Organization for this Limited Liability Company	were filed on 11-	15-2019 and assigned
	28	2000
Florida document number <u>L190092814</u> 8		ALBS
This amendment is submitted to amend the following:		AKA-AGGGE, LLC
A. If amending name, enter the new name of the limited liab	ility company here:	4
Anutha GOD Given GENY. The new name must be distinguishable and contain the words "Limited Mabi	ES EYEDE lity Company," the designati	on LLC" or the abbreviation "L.L.C."
		CRATER CIRCLE
Enter new principal offices address, if applicable:	111 de Con	E) 34610-7181
(Principal office address MUST BE A STREET ADDRESS)	a Chescist	FL. 37087 - 120L
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	veet address
		, Florida
	City	Zip Cade

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 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

Title	Name	Address	Type of Action
			□Add
			□Remove
			□Change
<u>-</u>			□Add
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ote: If the date	f other than the date of is listed, the date must be specific inserted in this block does tive date on the Department	not meet the appur	caole statutory ming	(optiona e than 90 days after filin requirements, this dat	.) g.) Pursuant to 605.0207 e will not be listed as
record specifies is filed.	a delayed effective date, bu	it not an effective t	time, at 12:01 a.m. o	the earlier of: (b)	The 90th day after the
nted			·		
	Hony L. I	of a member or ight	horized representative	of a member	
	1/				