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(((H24000086754 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (844)449-3624

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

Email	Address:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGNS THINE EYE MEDIA L.L.C.

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Thine Eye Media L.L.C.				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000116751</u> .	were filed on 04/30/2020 and assigned			
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	ity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	10779 SW 55th Street			
(Principal office address MUST BE A STREET ADDRESS)	Cooper City, FL 33328			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, enter the name of the new registere			
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	, Florida City Zip Code			
Now Registered Agent's Signature if changing Registered Agents				

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

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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
AMBR	Adrian Gonzalez	10779 SW 55th Street	□Add
		Cooper City, FL 33328	□Remove
			■ Change
			□Add
		<u> </u>	□Remove
			□Change
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ective date, if other than the effective date is listed, the date muse: If the date inserted in this blument's effective date on the D	st be specific and cannot be prio- lock does not meet the applic	r to date of filing or more the cable statutory filing req	ıan 90 days after filing.) Pursu	ant to 605.020 ot be listed a
cord specifies a delayed effectives filed.	e date, but not an effective t	ime, at 12:01 a.m. on th	se earlier of: (b) The 90th	day after the
March 5th	. 2024	·		
/s/ Adrian Gonzalez	Signature of a member or auth			

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