## K26 666 324671

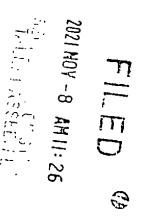
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C. BRUMBLEY NOV 29 2021

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT:	Consumer Nsy	ght UL ind Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing	
	ndence concerning this matter		
r rease return an correspo	indence concerning this matter	to the following.	
		Richard Sabatino Name of Person	<del></del>
		Consumer Noyaht U	-(
		Address	
	Boxa	City/State and Zip Code  1. P. Sabatino egmail. 40 to be used for future animal report no	
	1 1	City/State and Zip Code	
	E-mail address: (	o be used for future animal report no	entification)
For further information co	oncerning this matter, please co		
/	. t		_
Richard Sa	Person	at ( <u>561</u> ) <u>577</u> Area Code Dayti	-3372
Enclosed is a check for th	e following amount:		
≯\$25.00 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 Addres Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7		orporations

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Consumer 1	Usyght LLC			
(Name of the Limited Liability Compa- (A Florida Limited L	ny d <b>i i</b> t now appears or nability Company)	our records.)		
The Articles of Organization for this Limited Liability Company	were filed on	10-20-20	and assi	gned
Florida document number <u>L200032407</u> ]				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	lity company here:			
Consumer Nsight LLC			<del>:</del>	
The new name must be distinguishable and contain me words "Limited Liabili	ity Company," the desig	nation "LLC" or the abb	reviation "L.L	C."
Enter new principal offices address, if applicable:	NA			
(Principal office address MUST BE A STREET ADDRESS)		—.··	2021	
			· <b>₹</b> 0	T
Enter new mailing address, if applicable:	N/A	.*** * ) */3**	. œ -: <del></del>	:
(Mailing address MAY BE A POST OFFICE BOX)				
22,11,03,01,03,00,00		3	- 2	
		;	<u> </u>	<u>2</u>
B. If amending the registered agent and/or registered office a	ddress on our reco	rds, <u>enter the name</u>	of the new	register
agent and/or the new registered office address here:				
	11 / A			
Name of New Registered Agent:	N/H		<del></del> -	
New Registered Office Address:	·		···	
	Enter Florida	street address		
		, Florida		
	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 add or removed from our records:			
	Manager - Authorized Member	NA	
<u>Title</u>	<u>Name</u>	Address	Type of Action
	·		□ Add
			□Remove
			□ Change
			🗆 Add
			□Remove
			Change
			□Remove
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*********	·		□Add
			□Remove
			Change
	·		□Add
			□Remove
		<del></del>	Change
			□Add
		<del></del> .	□Remove
			☐ Change

). If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	NA
	<b>,</b>
_	
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<del></del>	
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_	
(If an effective Note: 1	e date, if other than the date of filing:
f the record record is file	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 d.
Dated _	November 2-d 202)
	Signature of a member or commorized representative of a member
	Richard Sabatino
	Typed or printed name of signee

Filing Fee: \$25.00