LZI 000158397

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PILED 2021 AUG 20 PM 8: 4 SECRETARY OF STATE

COVER LETTER

	Registration So Division of Co			
CHD IF	Envisage R	tealty Imaging LLC		
SUBJEC	· · · · · · · · · · · · · · · · · · ·	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		Daniel O Mecutchen		
			Name of Person	
		Envisage Realty Imaging		
		-	Firm/Company	···
		4524 Eden Woods Circle		
			Address	
		Orlando, Florida 32810		
			City/State and Zip Code	
		mccutchendmc@gmail.com E-mail address: (to be used for future annual report no	tification)
For furthe	er information c	concerning this matter, please c		
Daniel O	Mecutchen		321 9485469	
Name of Person		at () Area Code Daytii	me Telephone Number	
Enclosed	is a check for t	he following amount:		
≅ \$25.0	90) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre		Street Address: Registration Se	ection
]	Division of C	Corporations	Division of Co	orporations
i	P.O. Box 633	27	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Envisage Realty Imaging LLC

2021 AUG 20 PM 8: 42

(Name of the Limited Liability Company as it now appears on our resource TARY OF STATE (A Florida Limited Liability Company)

TALLAHASSEE, FLORY.

The Articles of Organization for this Limited Liability Company	were filed on April 06, 2021	and assigned
Florida document number 1.21000158397		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	-	
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:	ddress on our records, <u>enter the name</u>	of the new registered
Name of New Registered Agent:		······································
New Registered Office Address:		
	Enter Florida street address	
	Florida	
N	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am fa rovided for in Chapter 605, F.S. Or, ij	miliar with and This document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Barrett Gaines	4516 Wayfarer Place	
		Orlando, FL. 32807	■Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
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an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 ofe: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ocument's effective date on the Department of State's records. record 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 list filed.					
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August 17			time, at 12:01 a.m. on th	ne earlier of: (b) The 90	th day after the
Signature of a member or authorized representative of a member	is filed.				
Signature of a member or authorized representative of a member	t is filed.		·		
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