## L21000397092

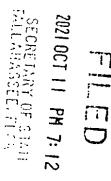
(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Na	me)
(Do	cument Number)	)
Certified Copies	Certificate	s of Status
Special Instructions to I	Filing Officer:	
	10/18	1/51 JH

Office Use Only



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10/11/21--01010--003 \*\*25.00



## **COVER LETTER**

Beyond Ey SUBJECT:	rewear LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Adriana Salem		
		Name of Person	
	Beyond Eyewear LLC		
		Firm/Company	
	5610 NW 79th Avenue		
		Address	
	Doral, FL 33166		
		City/State and Zip Code	<del></del>
	adriana.salem848@gmail.c	om (to be used for future annual report notil	fication)
For further information a	concerning this matter, please o		incation)
Adriana Salem	oncerning this matter, prease c		
	<u> </u>	305 818-6786 at ()	e Telephone Number
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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)
N. M. 183		_	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations

TO:

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

FILED

Beyond Eyewear LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2021 OCT 11 PH 7: 13 SECRETARY OF STATE

TALLAHASSEE, FLUKE.

The Articles of Organization for this Limited E	iability Company	were filed on 09/07/2021	and assigned
Florida document number L21000397092	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	oility company here:	
Beyond Eyewear LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		5610 NW 79th Avenue	
(Principal office address MUST BE A STREET ADDRESS)		Doral. FL 33166	
Enter new mailing address, if applicable:		5610 NW 79th Avenue	
(Mailing address MAY BE A POST OFFICE BOX)		Doral, FL 33166	<u> </u>
		···	
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office : ss here:	address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:	Adriana Salem		
New Registered Office Address:	5610 NW 79th	Avenue	
		Enter Florida street addre	SS
	Doral	, F	lorida <u>33166</u>
		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, Stgnature 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
AMBR	Adriana Salem	5610 NW 79th Avenue	<b>≣</b> Add
		Doral, FL 33166	□Remove
			□Change
AMBR	Adriana Salem Sakal	6105 Royal Poinciana Lanc	□Add
		Tamarac, FL 33319	≣Remove
		<del></del>	Change
			□Add
			□Remove
			□Change
			□ Remove
			Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change

An amendment was sent prio	r to this and was incomplete in changes needed to be made.
Additional changes on this ar	nendment include and should be added to the prior amendment received.
Name and address change wa	s submitted on 1st amendment;
Combining the 2 amendment	s, the following information is correct.
Correct Name is: Beyond Eye	ewear, LLC
Correct Principal Address: 56	510 NW 79th Avenue, Doral, FL 33166
Correct Mailing Address: 561	0 NW 79th Avenue, Doral, FL 33166
Correct Name as Registered A	Agent: Adriana Salem
Correct Address for Registere	ed Agent: 5610 NW 79th Avenue, Doral, FL 33166
Correct Name for AMBR: Ac	Iriana Salem
	<del></del>
<del></del>	
	t be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) ock does not meet the applicable statutory filing requirements, this date will not be listed as the
the record specifies a delayed effective cord is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
September 13th	2021
	Metaleu
	Signature of a member or authorized representative of a member

Typed or printed name of signee