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(Requestor's Name)		
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(City/State/Zip/Phone #)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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TO: Registration So Division of Cor			
RecklessPa	anda LLC		·
SUBJECT:	Name of Lin	ited Liability Company	·
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Rasheem Edward		
		Name of Person	
	Zenbusiness Inc		
		Firm/Company	
	5511 Parkerest Dr. Suite 1	03	. 4
		Address	
	Austin, TX 78731		22 <u>4</u> 79.
		City/State and Zip Code	***
	fulfillment@zenbusiness.co		
For further information c	E-mail address: (concerning this matter, please c	to be used for future annual report no all:	tification)
Zenbusiness Inc c/o Ras	-	844 4936249	
Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for the	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)
Mailing Addres		<u>Street Address:</u> Registration S	ection
Registration Section Division of Corporations		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee. 1	FL 52314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RecklessPanda LLC				
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) Jability Company)		_	
The Articles of Organization for this Limited Liability Company	were filed on 3/31/2022	and	assigne	:d
Plorida document number 1.22000155849				
his amendment is submitted to amend the following:				
a. If amending name, enter the new name of the limited liabi	lity company here:			
View Point Rentals LLC				
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or th	e abbreviation	"L.L.C."	•
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)		<u></u>	23	
		:	128	
			1	
nter new mailing address, if applicable:		1;	2	
Mailing address MAY BE A POST OFFICE BOX)		•	PH	·
		. ;	င္မာ	``
		<u> </u>	50	
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	ddress on our records, <u>enter the n</u>	ame of the	new re	<u>gister</u>
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	. Florida			
	City	Zip Co	de	

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 added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
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			🗆 Add
			□Remove

_____ □ Change

		
		
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		2022
(If an effective date is listed, Note: If the date inserte	er than the date of filing:	optional) s after filing.) Pursuant to 605.0207 (3)(h s, this date will not be listed as the
f the record specifies a delagecord is filed.	yed effective date, but not an effective time, at 12:01 a.m. on the earlier of	of: (b) The 90th day after the
Dated	2022	
/s/Riccard	a Monet Dore	
	Signature of a member or authorized representative of a member	
Riccarda Mo	onet Dore	
	Typed or printed name of signee	