L22000345172

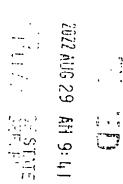
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COVER LETTER

TO: . Registration Section

Division of Cor	•						
#EERVISI BUBJECT:	UALS ÈLC						
	Name of Lim	ited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return all correspo	ondence concerning this matter	to the following:					
	Kelsey						
	Name of Person						
	ZenBusiness Inc						
Firm/Company							
5511 Parkerest Dr., STE 103							
		Address					
	Austin, TX 78731						
		City/State and Zip Code					
	fulfillment@zenbusiness.co	om to be used for future annual report notif	i.eurian)				
or further information o	oncerning this matter, please co		icativii)				
Kelsey c/o ZenBusiness Inc		844 493-6249 at ()					
Name c	of Person	Area Code Daytime	e Telephone Number				
Inclosed 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 tadditional copy is enclosed)	S60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)				
<u>Mailing Addres</u>		Street Address:					
Registration Section Division of Corporations		Registration Sec Division of Cor					
P.O. Box 632		The Centre of T	=				
Tallahassee.	FL 32314		e Street, Suite 810				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PEEP VISUALS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 7677 AUG 29 The Articles of Organization for this Limited Liability Company were filed on 08/05/2022 OF STAnd assigned Florida document number <u>L22000345172</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: PEEP ENTERPRISE LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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
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ective date, if other than t effective date is listed, the date n e: If the date inserted in this	block does not meet the app	dicable statutory filing	(optiona ore than 90 days after fili g requirements, this da	l) ng.) Pursuant to 605,020 te will not be listed as
ument's effective date on the	Department of State's recor	as.		
cord specifies a delayed effec filed.	tive date, but not an effectiv	e time, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
August 22	2022	·		
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	topher Omodewi Signature of a member or a	c athorized representative	of a member	