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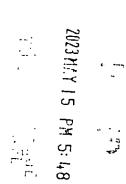
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of 7/11/2023

Ashley Bhie 863-589-3309 619 Terranova Dr. Wither Haven, Fl 33884

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Behind the Eve Investigations LLC Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
ASNICY Blut Name of Person
Firm/Company
470 City Contre 5.
Wither Haven Fl 33880 City/State and Zip Code
Behinch Reyelinesharthons @ anail. Com E-mail address (to be used for fliture annual report notification)
For further information concerning this matter, please call:
PSMCY BILLE at (803) 589-3309 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Bound Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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

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

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Behind the Eve	Investice	ations LLC		5 PH 5:48
(Name of the Limited	l Liability Compai V Florida Limited L	ny as it now appears on ou liability Company)	ir records.)	
The Articles of Organization for this Limited Lial Florida document number 12300108		were filed on <u>3</u>	01/2023	and assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	the limited liabi	ility company here:		
The new name must be distinguishable and contain the work Enter new principal offices address, if applical (Principal office address MUST BE A STREET)	ble:	ity Company," the designat	ion "LLC" or the abbre	viation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		470 Citi C Winter Hav	rentre 51. ven, Fl. 338	780
B. If amending the registered agent and/or regagent and/or the new registered office address		iddress on our records	s, <u>enter the name o</u>	f the new registered
Name of New Registered Agent:				
New Registered Office Address:	470 CH	1 Centre 54. Enter Florida stre	eet address	
	wirter	HIVE!	, Florida <u>33</u>	3880 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 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
MGR	Pontey Blue	470 Citi Cartre St.	ID/Ádd
	J	470 Citi Cartre St. Winter Haven, FL 33880	□Remove
		□Change	
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		-	□Remove
			□ Change

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<u>Note</u>	ctive date, if other than the date of filing: (optional) 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 605,0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
If the rec- record is	ord 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 filed.
Date	a_MCN_10th
	Signature of a member or authorized representative of a member