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| (Re                     | equestor's Name)  |             |
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| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nar | me)         |
|                         |                   |             |
| (Do                     | cument Number)    |             |
| Certified Copies        | _ Certificates    | s of Status |
| Special Instructions to | Filing Officer:   |             |
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Office Use Only



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## **COVER LETTER**

| TO: Registration S Division of Co  |   |   |   |
|--|---|---|---|
|  | Security Solutions                        |   |   |
| SUBJECT:   | Name of Limi                              | ted Liability Company   | <del></del>   |
|  |   |   |   |
| The enclosed Articles of   | Amendment and fee(s) are sub-             | mitted for filing.  |   |
| Please return all corresp  | ondence concerning this matter            | to the following:   |   |
|  | Daniel Platt                              |   |   |
|  |   | Name of Person  | <del></del>   |
|  | AccuView Security Solution                | ons   |   |
|  |   | Firm/Company  |   |
|  | PO Box 380921                             |   | 50.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed) |
|  |   | Address   |   |
|  | Murdock, FL 33938                         |   | <del></del>   |
|  | . 011                                     | City/State and Zip Code   |   |
|  | accuview@icloud.com<br>E-mail address: (  | to be used for future annual report notification)   | <del></del>   |
| For further information  | concerning this matter, please c          | all:  |   |
| Dan Platt  |   | 941 416-1948<br>at ( )  |   |
| Name   | of Person                                 | Area Code Daytime Telephone Nu  | unber   |
| Enclosed is a check for  | the following amount:                     |   |   |
| \$25.00 Filing Fee   | S30.00 Filing Fee & Certificate of Status | Certified Copy Cert (additional copy is enclosed) Cert  | tificate of Status & tified Copy  |
| Mailing Addi<br>Registration<br>Division of<br>P.O. Box 6<br>Tallahassee | n Section<br>Corporations<br>327          | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303 | ite 810   |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| liability Company)  | n our records.)  |  |  |
|---|--|--|--|
| The Articles of Organization for this Limited Liability Company were filed on 11/12/24  Florida document number 1.24000475703 |  | and assigned   |  |
|   |  |  |  |
| ility company here:   | :  |  |  |
| lity Company," the desig  | nation "LLC" or the abh  | reviation "L.L.C."   |  |
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| address on our reco   | TT   | ₹ .*   |  |
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| Enter Florida   | street address   |  |  |
|   | , Florida  | Florida  |  |
| City  |  | Zip Code   |  |
|   |  |  |  |
| performance of my<br>provided for in Cha  | duties, and I am fa<br>pter 605, F.S. Or, i  | miliar with and<br>f this document is  |  |
|   | ility company here:  ility company here:  ity Company." the designated and the second and the se | ility company here:  Iity Company," the designation "LLC" or the abb  Company, the designation "LLC" or the abb  Enter Florida street address  Enter Florida street address  Florida  City |  |

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 |
|--------------|---------------|---|----------------|
| MGR          | Jonathan Marr | 2472 Fowler Street Fort Myers, FL 33901 | ■Add           |
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|              |               |   | □Change        |
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| (If an el<br>Note: | tive date, if other than the dat<br>ffective date is listed, the date must be:<br>If the date inserted in this block<br>ment's effective date on the Depar | specific and cannot be prior t<br>does not meet the applica | ible statutory filing requ  | irements, this date will no | int to 605,0207 (.<br>it be listed as th |
| e reco<br>ord is f | ord specifies a delayed effective da<br>filed.   | te, but not an effective tir                                | ne, at 12:01 a.m. on the    | earlier of: (b) The 90th    | day after the                            |
|                    | Nov 27   | 2024  | _                           |                             |  |
| Dated              | 1  | ·   | _                           |                             |  |
| Dated              |  |   | _                           |                             |  |
| Dated              |  | nature of a member or autho                                 | rized representative of a m | ember                       |  |

Filing Fee: \$25.00