

M1400000019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

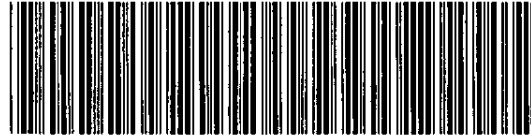
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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08/10/15--01042--017 \*\*60.00

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2015 AUG 10 PM 3:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

at Corleam AUG 11 2015

# McAFEE & TAFT

A PROFESSIONAL CORPORATION

10TH FLOOR • TWO LEADERSHIP SQUARE  
211 NORTH ROBINSON • OKLAHOMA CITY, OK 73102-7103  
(405) 235-9621 • FAX (405) 235-0439  
[www.mcafeetaft.com](http://www.mcafeetaft.com)

WRITER DIRECT  
(405) 552-2362  
FAX (405) 235-0439  
[jane.henson@mcafeetaft.com](mailto:jane.henson@mcafeetaft.com)

August 7, 2015

## **FEDERAL EXPRESS**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Re: Eye Level Solutions, LLC  
(FL document number M14000000019)

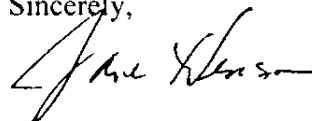
Ladies and Gentlemen:

Enclosed for filing is the Application by Foreign Limited Liability Company to file Amendment to Certificate of Authority (two copies provided), along with a certified copy reflecting the name change in its state of formation (two copies provided). Also enclosed is our check for \$60.00 to cover the filing fee, a certificate of status and a certified copy.

Please return filing evidence in the enclosed prepaid, self-addressed Federal Express envelope.

Thank you for your assistance. If you have questions about the filing please give me a call at 405/552-2362.

Sincerely,



Jane E. Henson-Martin  
Legal Assistant

Enclosures

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** EYE LEVEL SOLUTIONS, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sean Hunt

Name of Person

McAfee & Taft A Professional Corporation

Firm/Company

211 N. Robinson, 10th Floor, Two Leadership Square

Address

Oklahoma City, OK 73102

City/State and Zip Code

agentservices@mcafeetaft.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sean Hunt at ( 405 ) 235-9621

Name of Person

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

- ☐ \$25 Filing Fee      ☐ \$30 Filing Fee & Certificate of Status      ☐ \$55 Filing Fee & Certified Copy      ☒ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Eye Level Solutions, LLC

2. The Florida document number of this limited liability company is: M14000000019

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 12/19/2013

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: Genius Central Ecommerce, LLC

(must contain "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "LLC," or "LLC.")

6. 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*

Florida

*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, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

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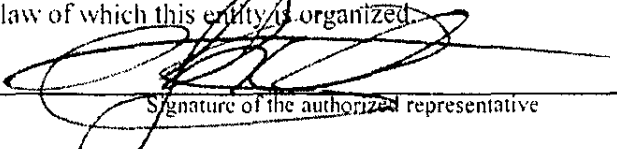
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
------------------------	-------------	----------------	-----------------------

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9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of the authorized representative  
John Miles, President of Genius Central Systems, Inc., its Sole Member/Manager  
John Miles  
\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00

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2015 AUG 10 PM 3:15  
CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "EYE LEVEL SOLUTIONS, LLC", CHANGING ITS NAME FROM "EYE LEVEL SOLUTIONS, LLC" TO "GENIUS CENTRAL ECOMMERCE, LLC", FILED IN THIS OFFICE ON THE SIXTH DAY OF AUGUST, A.D. 2015, AT 3:30 O'CLOCK P.M.

4783061 8100

151142967

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2624594

DATE: 08-07-15

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 03:32 PM 08/06/2015  
FILED 03:30 PM 08/06/2015  
SRV 151142967 - 4783061 FILE

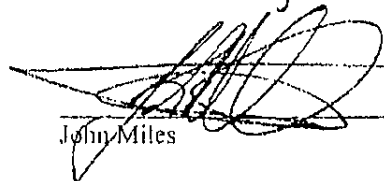
CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF FORMATION  
FOR  
EYE LEVEL SOLUTIONS, LLC

EYE LEVEL SOLUTIONS, LLC, a Delaware limited liability company (Delaware File No. 4783061) (the "Company"), for the purpose of amending its Certificate of Formation pursuant to Section 18-202 of the Delaware Limited Liability Company Act, hereby certifies that:

1. The name of the Company is EYE LEVEL SOLUTIONS, LLC.
2. The Company's Certificate of Formation is amended by deleting Article First in its entirety and replacing it with the following:  

"1. The name of the limited liability company is GENIUS CENTRAL ECOMMERCE, LLC."
3. This Certificate of Amendment shall become effective upon filing with the Delaware Secretary of State.

IN WITNESS WHEREOF, the undersigned authorized person has executed this Certificate of Amendment on the 6<sup>th</sup> day of August, 2015.

  
\_\_\_\_\_  
John Miles