Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name

: THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : I20070000020

: (813)435-3176

Fax Number

: (813)333-6358

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email addness please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BLOCKCHAIN SMART SYSTEMS, LLC**

Certificate of Status

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JUN 1 7 2023

Jun 16 2020 10:38AM NICK SPRADLIN Certified Copy 8133336358 04 Page Count Estimated Charge \$25.00

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Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLOCKCHAIN SMART SYSTEMS, LLC				
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L18000105903	were filed on 04/26/2018	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
Signature Innovation LLC				
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1382 Brookwood Forest Blvd .			
Principal office address MUST BE A STREET ADDRESS	Unit 709 West			
	Jacksonville, Florida 32225			
Enter new mailing address, if applicable:	1332 Brookwood Forest Blvd.			
Mailing address MAY BE A POST OFFICE BOX)	Unit 709 West			
	Jacksonville, Florida 32225			
		<u> </u>		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new registe		
Name of New Registered Agent:				
New Registered Office Address:				
	Emer Florida street address			
	, Florida			
	City	Zip Code		
vew Registered Agent's Signature, if changing Registered Agent:				
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agrorovisions of all statutes relative to the proper and complete	ee to act in this capacity. I furth			

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
ambr	Krystal Hinson	1382 Brookwood Forest Blvd .	
		Unit 709 West	□Remove
		Jacksonville, Florida 32225	□Change
	<u></u>		□Add
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06/15	2020			
ated 06/15	Signature of a member or a	·		