L18000056653

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COVER LETTER TO: Registration Section **Division of Corporations** OWL COMMERCE LLC SUBJECT: _ 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: RAY DOMINGUEZ Name of Person SMAART LLC Firm/Company 8200 HIALEAH GARDENS BLVD # 8 Address HIALEAH, FL 33018 City/State and Zip Code RAY@SMAARTBIZ.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RAY DOMINGUEZ Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. □ \$30.00 Filing Fee & **\$25.00** Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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

. DocuSign Envelope ID: 4525F46F-290D-487D-B227-11C37F7D2931

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company	were filed on 03/05/2018 and assigned		
Florida document number L18000056683			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "LLL.C."		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	100 N 18th STREET		
	SUITE 300		
	PHILADELPHIA, PENNSYLVANIA, 19103		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	100 N 18th STREET		
	SUITE 300		
	PHILADELPHIA, PENNSYLVANIA, 19103		

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.

Cirv

DocuSign Envelope ID 4525F46F-290D-487D-B227-11C37F7D2931 in amending Authorized rerson(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	DE ARRUDA DORACIO, RAFAEL	1700 BENJAMIN FRANKLIN PWY, apt 1704	⊡Add
		PHILADELPHIA. PA 19103	= Remove
			□Change
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	he date inserted in this block	does not meet the appli	icable statutory filing red	(optional) nan 90 days after filing.) Pursuant juirements, this date will not b	to 605.0200 be listed as
<u>Note:</u> If t	's effective date on the Depar				
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