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SECRETARY OF STATE

COVER LETTER

TO:

Registration Section **Division of Corporations**

Smart Properties, 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:

T. Christopher McLaughlin, Jr.

Name of Person

Smart Properties, LLC

Firm/Company

206 East Pine Street

Address

Lakeland, FL 33801

City/State and Zip Code

Imtillc@gmail.com

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

For further information concerning this matter, please call:

Peggy Harbuck

at (863) 940-4800

Area Code & Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status □\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2013 JAN 10 PH 2: 33 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Smart Properties, LLC	
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Lie Florida document number L02000033040	ability Company were filed on 12/10/2002 and assigned
This amendment is submitted to amend the following	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>
B. If amending the registered agent and/or the new registered of	or registered office address on our records, <u>enter the name of the new</u> fice address here:
Name of New Registered Agent:	
New Registered Office Address:	From Electric de adapte
	Enter Florida street address
	, Florida
	City 7in 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 608, 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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	Michael Walker	206 East Pine Street	✓ ∧dd
		Lakeland, FL 33801	Remove
			Add
			Remove
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			Remove
			<u>-</u>
			
			Add
			Remove
			_
			Remove

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
-	
ated D	ecember 26 2012
	1000
	Signature of a member or authorized representative of a member
	T. Christopher McLaughlin, Jr.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 JAN 10 PM 2: 33