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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Smalley Group, 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:

Wayne Smalley

Name of Person

The Smalley Group, LLC

Firm/Company

2608 Crescent Lake Ct.

Address

Windermere, FL 32803

City/State and Zip Code

wayne@smalleynco.com

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

For further information concerning this matter, please call:

Wayne Smalley

Name of Person

_407\497-724°

Area Code

Daytime Telephone Number

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

THE SMALLEY GROUP, LL		
(<u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appears on our r da Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Florida document number L0500067073	Company were filed on July 7, 2	and assigned
Florida document number Loodood 7070	 ·	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the lir</u>	nited liability company here:	
N/A		
The new name must be distinguishable and end with the words "I	imited Liability Company," the designation	1 "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	7 SE
(Principal office address MUST BE A STREET ADD	RESS)	
		33 29 P
•		Sandard Sandard
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		cords, enter the name of the nev
Name of New Registered Agent: N.	/A	
New Registered Office Address:		
	Enter Florida street a	nddress
		_, 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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member <u>Title</u> Address Type of Action <u>Name</u> 2608 Crescent Lake Ct. MGR Smalley, Madeleine J Windermere, FL 34786 Smalley, Wayne 2608 Crescent Lake Ct. MGR Windermere, FL 34786 Madeleine & Wayne Smalley RLT MGR Madeleine J. Smalley, Trustee 2608 Crescent Lake Ct. Windermere, FL 34786 Madeleine & Wayne Smalley RLT MGR Wayne Smalley, Trustee 2608 Crescent Lake Ct Windermere, FL 34786 □ Add ☐ Remove

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	The members of the LLC, Madeleine Smalley and Wayne Smalley,
	are transferring their respective ownership shares to their
	Madeleine and Wayne Smalley Revocable Living Trust, which
	was created on July 22, 2014, and which names them co-trustees,
	and Richard Hunt and then Michelle Hunt successor trustees.

E. Effective date, if other than the date of filing: September 1, 2014 (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated August 12

2014

Signature of a member or authorized representative of a member Wayne Smalley, MGRM

Typed or printed name of signee

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Filing Fee: \$25.00

SECRETARY OF STATE

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