L05000100892

(Requestor's Name)	
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PICK-UP WAIT MAIL	
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COVER LETTER

TO: Registration So Division of Con			
SMART SE	HOOTERS, LLC		
SUBJECT:	Name of Lim	aited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ADNAN MALIK		
	SMART SHOOTERS, LL	Name of Person	
		Firm/Company	
	765 MARKHAM WOODS		
		Address	
	LONGWOOD, FL 32779		
	AZMALIK@GMAIICOM	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	fication)
For further information of	concerning this matter, please c	all:	
ADNAN MALIK		407 927-6611	
	. <u> </u>	at ()	e Telephone Number
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addres</u> Registration	Section	Street Address: Registration Sec	
Division of C	Cornorations	Division of Cor	norations

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SMART SHOOTERS, LLC		
(<u>Name of the Lim</u>	ited Liability Company as it now ag (A Florida Limited Liability Compa	pears on our records.) ny)
The Articles of Organization for this Limited Elorida document number L05000100892	Liability Company were filed or	10/13/2005 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability compan	<u>y here</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	02
		- ·
	<u> </u>	1
Enter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE</u>		
		2
B. If amending the registered agent and/or agent and/or the new registered office addr	ess here:	ur records, <u>enter th</u> e name of the new reg
Name of New Registered Agent:	NORTHWEST REGISTEREI) AGENT LLC
New Registered Office Address:	7901 4th St N, STE 300	
	Enter	Florida street address
	St. Petersburg	. Florida 33702
	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 Authorized Person(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>	<u>Address</u>	Type of Action
AMBR	M. KASHIF AKRAM	765 MARKHAM WOODS RD,	
			= Add
		LONGWOOD, FL 32779	
			□Remove
			Change
MBR	IRAM MALIK	765 MARKHAM WOODS RD	
		1 (MI/MA/MA EL 22770)	□ Add
		LONGWOOD, FL 32779	≣Remove
			Skemoke
			□Change
			
			□Add
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