L09000115923

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		:

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11 MAY -4 PM 3:5

SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

MAY - 5 2411

EXAMINER

COVER LETTER

on rations
Smith on Science LLC Name of Limited Liability Company
nendment and fee(s) are submitted for filing.
ence concerning this matter to the following:
Surie Smith Name of Person
Smith Accounting a Consulting, the
3505 Highland Auc W
Bradenton FC 34205 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
terning this matter, please call:
at (941) 773 - 8949 Area Code & Daytime Telephone Number
following amount:
\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

11 MAY -4 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

April 22, 2011

SUZIE SMITH 3505 HIGHLAND AVE W BRADENTON, FL 34205

SUBJECT: SMITH ON SCIENCE LLC

Ref. Number: L09000115923

We have received your document for SMITH ON SCIENCE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 311A00009829

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF CORPORATIONS

11 MAY -4 PM 3:56

(Name of the Limited Liability (A Florida	ty Company as it now appear i Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liability Florida document number <u>L09000115</u>		1112010 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the line Smith Accounting to the line. The new name must be distinguishable and end with the we "L.L.C."		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	En	ter Florida street address
		, 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 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

If amending any other information, enter change(s) here: (Attach additional sheets, if necessar	Add Remove
	Remove
	Add
	Remove
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	Remove
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	Remove
amending any other information, enter change(s) here: (Attach additional sheets, if necessary)	Remove
	y.)
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	SEGRE I
	
1 <u>4/30/11</u>	CORPORATIONS -4 PH 3:56
1. 3 1-4	22
Signature of a member or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00