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2022 OCT 28 MM II: 17 SECRETARY OF STATE TALLAMY SEEL FL

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co						
	ERAPY LLC					
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspondence	ondence concerning this matter	to the following:				
	STEPHEN GUERRERO					
		Name of Person		_		
	GUERRERO LAW GRO	UP, PLLC				
		Firm/Company		_		
	6600 COW PEN RD, SUI	TE 260				
		Address		_		
	MIAMI LAKES, FL 3301	4		S LIE	201	
		City/State and Zip Code		- ∑c	22 0	nų
	SGUERRERO@THEGUE	RREROLAW.COM			CT 2	
	E-mail address: (to be used for future annual report noti-	fication)	ŠR S	8	
For further information of	concerning this matter, please e	all:		in Sign	<u> </u>	i tarak tu
STEPHEN GUERRERO)	954 410-1037		E A	2022 OCT 28 AMII: 17	f, 1800
Name c	of Person		e Telephone Numbe	er		
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)	Certifie	ate of Sta	tus &	
Mailing Address Registration S Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Corp The Centre of T	porations			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SMARTHERAPY LLC			
(Name of the Lim	ited Liability Company as it now : (A Florida Limited Liability Com	appears on our records.) pany)	
The Articles of Organization for this Limited I	Liability Company were filed o	on <u>02/09/2011</u>	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability compa	iny here:	
The new name must be distinguishable and contain the	words "Limited Liability Company,	"the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		202Z
			- FR - O - T
Enter new mailing address, if applicable:			28 1
(Mailing address MAY BE A POST OFFICE BOX)			Mi = 0
B. If amending the registered agent and/or agent and/or the new registered office addre	C.	our records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:	GUERRERO LAW GROU	P, PLLC	
New Registered Office Address:	6600 COW PEN RD SUITE	E 260	
	Ent	ter Florida street address	
	MIAMITLAKES	, Florida <u>3</u>	3014
	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>	Address	Type of Action
MGR	ROSA, CHAMILE	5190 NW 167TH STREET, SUITE 108	
		MIAMI. FL 33014	\bullet Remove
			□ Change
AMBR	PINA HOLDINGS LLC	5190 NW 167TH STREET, SUITE 108	= Add
		MIAMI, FL 33014	🗆 🗆 Remove
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Mective date, if other than the data an effective date is listed, the date must be		to date of filing or more	(option	i al) ling.) Purs	uant to 60	05.0207
ote: If the date inserted in this block ocument's effective date on the Department.	does not meet the applica	able statutory filing re	quirements, this o	ate will r	iot be lis	sted as
record specifies a delayed effective da is filed.	ite, but not an effective ti	me, at 12:01 a.m. on t	he earlier of: (b)	The 90th	n day afi	er the
october 24	2022	_·				
Sig	nature of a member or author	orized representative of a	ı member			