

L1200000158071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

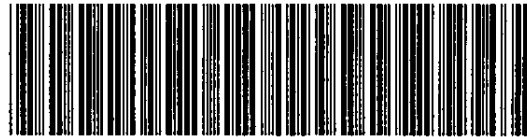
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2013 JAN 10 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan JAN 11 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Smart International Title

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:

Deana La Rosa

Name of Person

Smart International Title

Firm/Company

1420 Celebration Blvd Suite 200

Address

Celebration, FL 34747

City/State and Zip Code

joe@larosarealtycorp.com

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

For further information concerning this matter, please call:

Deana La Rosa

Name of Person

at **407 809-2910**

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

FILED

2013 JAN 10 PM 2:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Smart International Title, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/19/2012 and assigned
Florida document number L12000158071

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Deana La Rosa

New Registered Office Address:

1420 Celebration Blvd Suite 200

Enter Florida street address

Celebration

Florida 34747

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.

Deana La Rosa
If Changing Registered Agent, Signature of New Registered Agent

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

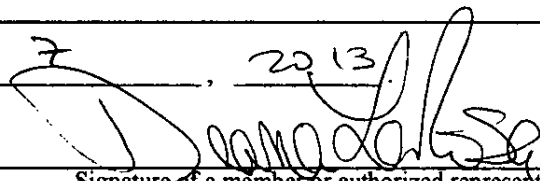
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Next Generation of Real Estate	1420 Celebration Blvd	<input type="checkbox"/> Add
		Suite 200	<input checked="" type="checkbox"/> Remove
		Celebration, FL 34747	
MGRM	Deana La Rosa	1420 Celebration Blvd	<input checked="" type="checkbox"/> Add
		Suite 200	<input type="checkbox"/> Remove
		Celebration FL 34747	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated

January 7, 2013



Signature of a member or authorized representative of a member

Deana La Rosa

Deana La Rosa

Typed or printed name of signee

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