L13000097208

(Rec	questor's Name)	
(Add	lress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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GEORGE RY GEORGIO

B. BOSTICK OCT **1 6 2013**

EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

CHD IFCT.

S.M.INK, ĹLC

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:

SHOHNN O. MONTALBAN

Name of Person

S.M.INK, LLC

Firm/Company

2776 FLAMINGO LAKE DR

Address

WEST PALM BEACH, FL 33406.

City/State and Zip Code

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

TALLAHASSEE, F

013 OCT 15 Pit 4

For further information concerning this matter, please call:

SHOHNN O.MONTALBAN

Name of Person

561,951-7796

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**

	S.M.INK			
(<u>Name of the Limited L</u> (A F	iability Compan	y as it now appears o	n our records.)	
(A F	lorida Limited Li	аонну Сотрану)		
The Articles of Organization for this Limited Liability Company were filed on 07/09/2013				
Florida document number L13000097208	,			
	·			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	<u>he limited liabil</u>	ity company here:		
SHOHNN, LLC				
The new name must be distinguishable and end with "L.L.C."	the words "Limite	ed Liability Company,	" the designation "LLC"	or the abbreviation
Enter new principal offices address, if applical	ble:	N/A		
(Principal office address MUST BE A STREET	ADDRESS)			2013
			F 2	000

Parts 11 12 13 15 11 13		N/A	(A)(A)	တ်
Enter new mailing address, if applicable:		14/15	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	-
			Carl a service of the control of the	<u></u>
			13-	~
B. If amending the registered agent and/or			records, enter the	name of the new
registered agent and/or the new registered offi	<u>ce address here</u>	:		
Name of New Registered Agent:	SHOHNN O	. MONTALBAN		
New Registered Office Address:	2776 FLAMINGO LAKE DR			
	Enter Florida street address			
	WEST PALM	м веасн	, Florida <u>3340</u>	6
		City		Zip Code
New Registered Agent's Signature if changing Da	aistared Agents			

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, Lhereby 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	<u>Name</u>	Address	Type of Action
MGR	THURSTON MOYE	134 DUKE DR	Add
		LAKE WORTH, FL 33480	Remove
MGR	MALIK PEROZA	1479 LAKE MANGO WAY	
		WEST PALM BEACH, FL 33405	Remove
		TAL CALL	Add O Remove
		SEE, FLORID	
			Remove
			Add
			Remove
			Add
			Remove

D. If amending any other informa N/A	tion, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	
OCTOBED 44th	2042
October 11th	, 2013
	CID my Qo
Sig	nature of a member or authorized opresentative of a member
	SHOHNN O. MONTALBAN Typed or printed name of signee
	.)kan ar kuman umun ar ai k uaa

Page 3 of 3

Filing Fee: \$25.00

2013 OCT 15 PH 4: 28



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2013

SHOHNN O. MONTALBAN S.M.INK, LLC 2776 FLAMINGO LAKE DRIVE WEST PALM BEACH, FL 33406

SUBJECT: S.M.INK, LLC Ref. Number: L13000097208 2013 OCT 15 PH 4: 28

We have received your document for S.M.INK, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L03000041709.

Please return 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) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 213A00021820