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18 SEP 10 PN 3: 53

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: Smar - Westside Land & Development 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:
Calvin K. Azadi Esq. Name of Person
Azadi Law P.A. Firm/Company
Firm/Company
31 SE S+ L S+., Ap+. 3204
Miami, FL 33131 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Calvin K. Azordi, Esq. at (786) 757 6877 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
■ \$25.00 Filing Fee □ \$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, F1, 32314 CIFF Tallahassee, F1, 32314 CIFF Tallahassee, F1, 32301 CIFF Tallahassee, F1, 32301 CIFF Tallahassee, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sings + Westsid	lity Company as it now appears on our records.) da Limited Liability Company)
(A Florid	da Limited Liability Company)
The Articles of Organization for this Limited Liability C	Company were filed on 01/19/2016 and assigned
Florida document number L 16 0000 110 2 7	<u>1_</u> .
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new name must be distinguishable and contain the words "Lin	mited 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 ADD	ORESS)
incipal office duaress MOST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amounting the projectored agent and/on regi	istered office address on our records, enter the name of the nev
registered agent and/or the new registered office add	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
<u></u> .	, 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 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	Gustavo Guerra Villaca	7431 SW 131 ST	D /Add
		Miani, FL 33156	Remove
			Change
<u> </u>	GGV Hulding LLC	7481 SW 131 ST	
		Miami, FL 33156	[I] Remove
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an effec l <mark>ote:</mark> H	date, if other than the date of filing: (op ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after the date inserted in this block does not meet the applicable statutory filing requirements, the seffective date on the Department of State's records.	tional) ter filing.) Pursuant to 605. his date will not be liste	ed as t
e reco	d specifies a delayed effective date, but not an effective time, at 12:01 Oth day after the record is filed.	. a.m. on the earlie	er of:
e reco The 9	September 5 . 2018.	. a.m. on the earlie	er ot:
e reco The 9	Oth day after the record is filed.	a.m. on the earlie	er of:
e reco The 9	September 5 . 2018.	a.m. on the earlie	er of:

Filing Fee: \$25.00