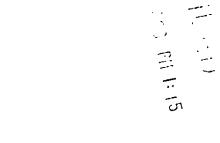
## L16 000 15 6051

(Reques	tor's Name)	•
(Address	5)	
(Address	5)	
(City/Sta	te/Zip/Phone #)	
PICK-UP	TIAW	MAIL
(Busines	s Entity Name)	
(Docume	ent Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing	) Officer:	
2.1.19		

Office Use Only



200329407672



05/29/19--01604--019 \*\*60.00

RECEIVED

LALBRITTON

### COVER LETTER

то:		tration Sect on of Corpo								
SUBJE	СТ: _	<u>SMO</u>	KE	HUT	79	ST	LLC			
				Name	of Limited I	_iability C	ompany			
		Articles of A					-			
Picase r	eturn at	ll correspond	ience conc	erning this	matter to in	e 10110W1	ng:			
				MCKO	Y D	SLi	MLY			_
						Namelo	f Person			
			SMO	oke H	UT F	19 Sirm/C	onipany	<u> </u>		_
			170	40 SI	N 39					_
						Add	lress			
			MI	RAMP	IR F	ty/State a	33027 nd Zip Code	<u> </u>	<u> </u>	-
						l.	oure annual		ration)	
For furt	her info	ormation con	cerning th	is matter, pl	ease call:					
WC	KOY	D SL	DWLY			at ( <u></u>	(05) C	123 - 2	2953 Telephone Numbe	
		(vanie or i	CISOII			All	ea Code	Daytime	retephone Numbe	ı
Enclose	d is a c	heck for the	following	amount:						
□ \$25	.00 Fili	ng Fee		Filing Fee ficate of Sta		Certif	Filing Fee ded Copy and copy is end		Certified	ate of Status &

#### 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

SMOKE HUT 79 ST	uc
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Compan	y were filed on 08 19 2016 and assigned
Florida document number <u>L16000156051</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Lial	bility 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)	
	201
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
Andreas MAT BE AT OST OFFICE BONY	
	<u> </u>
	office address on our records, enter the name of the new
registered agent and/or the new registered office address he	ere:
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Address.	Enter Florida street address
	Florida
	, Florida, Zip Code
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	s provided for in Chapter 605, F.S. Or, if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

	g Authorized Person(s) authorized to nd from our records:	nanage, enter the title, name, and address of o	each person being added
MGR = M $AMBR = M$	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	SMOKE HUT INC	17040 SN 39 (OURT Miremar, FL 33027	
			Remove
-			Change
MGR	MCKOY D SLOWLY	17040 SW 39 COURT Miramar, FL 33027	Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			Change
	<del></del>		
			□ Remove
			Change
	<del></del>		
			Remove
			Change

				ıl sheets, if necessa	
			·		
					<u> </u>
	<del></del>	_		<del></del>	
····					<del></del>
				-	
					<del></del>
ective date, if other	than the date of fil	lino:		(optional	<b>)</b>
n effective date is listed, the term of the date inserted cument's effective date.	he date must be specific and in this block does no	and cannot be prior to t meet the applica	o date of filing or more	than 90 days after filin	g.) Pursuant to 605.02
record specifies a The 90th day after			an effective tin	ne, at 12:01 a.m	. on the earlier
ed May	23	2019			
	Signature of	a member or author	nized representative of	a member	
		_			
	Mekhu	SLOA Typed or printed	124		

Page 3 of 3

Filing Fee: \$25.00