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то:	Registration Se Division of Cor			
CUD IEZ		e Consumer Services LLC		
SUBJEC	∪1 ;	Name of Lim	uited Liability Company	
The encl	osed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Jonathan Roofeiim		
			Name of Person	
			Firm/Company	
		2516 NW 108th Ter		
			Address	
		Sunrise Florida 33322		
			City/State and Zip Code	Par
		jroof12345@gmail.com		
		E-mail address: (to be used for future annual report notific	cation)
For furth	er information co	oncerning this matter, please ca	all:	
Jonathan	n Roofeiim		561 838-3000 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	e following amount:		
\$25.0	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
Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

First Choice Consumer Services 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 $\frac{9-8-2016}{1}$ Florida document number L16000165413 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SmartBiz Marketing Solutions LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 124 NW 14th Ave Boynton Beach Florida, 33435 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 124 NW 14th Ave Boynton Beach Florida, 33435 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: New Registered Office Address: Enter Florida street address City 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

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	David Hoffman	124 NW 14th Ave	≅ Add
		Boynton Beach, Florida 33435	□ Remove
			Change
			□ Add
			☐ Remove
			☐ Change
			□ Add
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		Change T	
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SmartBiz Marketing Solut	ions - EIN: 82-0854240		
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ctive date, if other than t	he date of filing:	(or	otional)
effective date is listed, the date in	nust be specific and cannot be prior	to date of filing or more than 90 days a lible statutory filing requirements,	fler filing.) Pursuant to 605.0
ment's effective date on the	Department of State's records.	tole statutory ming requirements,	tins date will not be fisied
ecord specifies a delay se 90th day after the re		an effective time, at 12:0	1 a.m. on the earlier
April 4th	2017		
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Typed or printed name of signee

Filing Fee: \$25.00