## 116000230997

(Requestor's Name)	_
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



700321197717

11/28/18--01004--006 ++25.00

5,5,18

2018 NOV 28 PM 4:21

## COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	JL Smart Busine Name of Lic	ess, LLC nited Liability Company			
The enclosed Articles of	`Amendment and fec(s) are sul	omitted for filing.			
Please return all corresp	ondence concerning this matter	r to the following:			
		Pedro Leon Name of Person			
JL Smart Business, LLC					
		Firm/Company			
	2	.550 NE 51st Street #.	201		
		Address			
		Fort Lauderdale	e, Florida 33308		
	***************************************	City/State and Zip Code			
	<u>  lpedroandre</u>	es@hotmail.com			
	E-mail address: (	to be used for future annual repor	rt notification)		
For further information of	oncerning this matter, please c	all:			
Pedro Leon		at (at	297-6902		
Name o	f Person		aytime Telephone Number		
Enclosed is a check for the	ne 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

TO:

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

2018 NOV 28 PM 4: 21

JL Smart	Business,	LLC	1.5	RETARY OF STATE
(Name of the Limited Lia (A Fig.	billty Company as rida Limited Liabili	it now appears on o ty Company)	ur records.)	
The Articles of Organization for this Limited Liabilit	y Company were	filed on12/2	22/2016	and assigned
Florida document numberL16000230997	<del></del> •			
This amendment is submitted to amend the following	3.			
A. If amending name, enter the new name of the l	imited liability c	company here:		
The new name must be distinguishable and contain the words "	Limited Liability Co	mpany," the designa	tion "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET AD	DRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or re registered agent and/or the new registered office a		address on our	records, enter	the name of the new
Name of New Registered Agent:	Pedro Le	on		
New Registered Office Address: 2550 NE 51st Street #201  Enter Florida street address				
	Fort Lauc	derdale	, Florida	33308
		ity —	_	Zip Code
New Registered Agent's Signature, if changing Registe	red 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.

> Pedro Leon  $\mathcal{P}\!L$ 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 Title Name Address Type of Action 2550 NE 51st Street # 201 Fort Lauderdale, FI 33308 **AMBR** Pedro Leon (CEO) M Add □ Remove ☐ Change \_□ Add \_□ Remove \_C Change □ Add □ Remove \_□ Change  $\Box$  Add \_□ Remove \_□ Change □ Add ☐ Remove \_□ Change  $\Box$  Add ☐ Remove

☐ Change

,	Pedro Leon (Chief Executive Officer) (AMBR)
	Julio Leon (Vice-President) (AMBR)
-	
_	
_	
<u></u>	
_	
-	
-	
(If an effect Note: If	tive date, if other than the date of filing:  11/26/2018 (optional)  (optional)  (ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)  (the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that's effective date on the Department of State's records.
the reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: Oth day after the record is filed.
Dated	November 26 . 2018 .
	PL Pedro LEon
	Signature of a member or authorized representative of a member
	Pedro Leon
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00