

L17000 082 171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

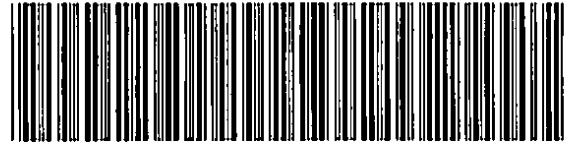
(Business Entity Name)

(Document Number)

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JUL 29 2019

2019 JUL 30 PM 1:35

Amend

AUG 12 2019

1 ALBRITTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SMART PBM LLC  
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:

SWATANTRA ROHATGI

Name of Person

Firm/Company

20809 CEDAR BLUFF PLACE

Address

LAND O LAKES, FL 34638

City/State and Zip Code

SAM@SMARTPBM.COM

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

For further information concerning this matter, please call:

SWATANTRA ROHATGI

Name of Person

at ( 813 ) 340-4423

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

SMART PBM 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 4-12-2017 and assigned  
Florida document number L17000082171

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

3458 LAKESHORE DRIVE  
TALLAHASSEE  
FL 32312

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10151 UNIVERSITY BLVD  
STE 200  
ORLANDO, FL 32817

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:

URS AGENTS, LLC

New Registered Office Address:

3458 LAKESHORE DRIVE

Enter Florida street address

TALLAHASSEE

Florida

32312

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.

By: Kristen Allison

Kristen Allison, Assistant Secretary

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>       | <u>Address</u>         | <u>Type of Action</u>                      |
|--------------|-------------------|------------------------|--|
| MGR          | FORTUNA GROUP LLC | 1507 LAMPMAN CT        | <input checked="" type="checkbox"/> Add    |
|              |                   | CHEYENNE               | <input type="checkbox"/> Remove            |
|              |                   | WY 82007               | <input type="checkbox"/> Change            |
| MGR          | SWATANTRA ROHATGI | 20809 CEDAR BLUFF PL   | <input type="checkbox"/> Add               |
|              |                   | LAND O LAKES           | <input checked="" type="checkbox"/> Remove |
|              |                   | FL 34638               | <input type="checkbox"/> Change            |
| MGR          | SANDEEP MATHOW    | 1759 LAUREL BROOK LOOP | <input type="checkbox"/> Add               |
|              |                   | CASSELBERY, FL 32707   | <input checked="" type="checkbox"/> Remove |
|              |                   |                        | <input type="checkbox"/> Change            |
|              |                   |                        | <input type="checkbox"/> Add               |
|              |                   |                        | <input type="checkbox"/> Remove            |
|              |                   |                        | <input type="checkbox"/> Change            |
|              |                   |                        | <input type="checkbox"/> Add               |
|              |                   |                        | <input type="checkbox"/> Remove            |
|              |                   |                        | <input type="checkbox"/> Change            |
|              |                   |                        | <input type="checkbox"/> Add               |
|              |                   |                        | <input type="checkbox"/> Remove            |
|              |                   |                        | <input type="checkbox"/> Change            |

[illegible]

(If an effective 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)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Stewart Roberts

SWATANTRA ROHATGI

**Filing Fee: \$25.00**