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PICK-UP	WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to Filin	g Officer:	·
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Office Use Only



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SECRETARY OF STATE

RECEIVED

2022 MAY 10 PM 12: 08

SECHETATION STORES TALL AHACSEE, FL

April 21, 2022

SEAN C MOORE 7758 NW 71ST WAY PARKLAND, FL 33067

SUBJECT: S&M REALTY GROUP, LLC

Ref. Number: L17000105849

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The form you submitted is for a FOREIGN LIMITED LIABILITY COMPANY, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas Regulatory Specialist II

Letter Number: 522A00009355

COVER LETTER

Division of Corporations
SUBJECT: S+M Polarity Grow UC 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:
Sean C. More Name of Person
Stm Draity Group LLC.
MSE NW 715 Way Address
Parland for 33047 City/State and Zip Code SMOVESC 33 Q GMAL . Com E-mail address: (to be used for futbod annual report notification)
For further information concerning this matter, please call:
Sean C more at (94) 274-4728 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address:

TO:

Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STAND THE COULD LICE MAY TO PM 7:43
(Name of the Limited Liability Company as it now appears on Gir records RY OF STATE (A Florida Limited Liability Company) TALLAHASSEE. FL
(A Florida Ellinico Ellasonicy Company) IALLAHASSEE. FL
The Articles of Organization for this Limited Liability Company were filed onand assigned
Florida document number <u>L1700105849</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
moorealife uc
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
1
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:
At the Court of American Court of the Court
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida j

Zip Code

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>	Name	Address	Type of Action
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Remove
			Remove
			□Add
-			□Remove
			□Change
			□ Add
			□Remove
			_ □Change

Effective date, if other than the date of filing:	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements and document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 1201 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated	
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Signature of a member or authorized representative of a member	Signature of a member or authorized representative of a member
Typed or printed name of signee	SEAN MODRE