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COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: THE SMIM DRO PERTY GROUP, 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:
RAY MOND SMITT
Name of Person
THE SMITH DROPERTY GROUP, LLC
92 PINE ST
Address
WINDERMERE, FL, 34786
City/State and Zip Code RAYFPA @ ADL . COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (407) 217 - 60/2 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee \& Certificate of Status \$\Bigcup \\$60.00 Filing Fee, Certificate of Status \& Certified Copy (additional copy is enclosed) \$\Bigcup \\$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
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

THE SMITH PRODE	DIY GROUP.	LLC	
ME SMIM PROPE (Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on o ted Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>L17000146</u> This amendment is submitted to amend the following:	any were filed on <u>07</u> / 007	107/2017	- and assigned
A. If amending name, enter the new name of the limited l	iability company here:		
			2
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designa	tion "LLC" or the abbrevia	tion: "L.L.C?"
Enter new principal offices address, if applicable:		om 115 31,5 /	**************************************
(Principal office address MUST BE A STREET ADDRESS)	·	27	<u> </u>
(Frincipui office unuress MUST BE A STREET ADDRESS,	<u> </u>		
			7 17 19 19 19 19 19 19 19 19 19 19 19 19 19
		<u> </u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l		records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·		
	Enter Florida str	reet address	
***************************************		, Florida	
	City	Zij	v Code
New Registered Agent's Signature, if changing Registered Age	ent:		

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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

AMBR = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	JOHN RYAN	27 CRONK CULLYN, COLBY ISLE OF MAN, UK 1M94	- N Q
	25/0 '		☐ Remove
			☐ Change
MGR	PHELMA RY	AW 27 CRONK CULLYN, COLBY ISLE OF MAN, UK, IM9	
	25%		□ Remove
			Change
	·		□ Add
		· :	☐ Remove
			☐ Change
			Add
			☐ Remove
			Change
			80 Add
			Remove
			□ Change
		****	Add
			□ Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
JOHN RYAN IS 25% OWNER OF A.
PARCEC OF LAWS OWNED BY THE LLC
THE SMITH PROPERTY GROUP. LIC, ONLY
AND HAS NO RIGHTS OR BUSINESS INTERESTS
IN THE COMPANY OTHER THAN THE PROPERTY
OWNERSTIP, PROPERTY is LOCATED IN POCK
COUNTY FLORION, PARCEL 1. D NUMBERS: 5-
27-28-28-847000-000300 /27-28-28-84700-000320
THELMA RYAN is 25% OWNER OF A PARCEL
THELMA RYAN IS 25/0 OWNER OF A PARCEL OF LAND OWNED BY THE LLC,
"THE SMITH PROPERTY GROUP, LLC, ONLY
AND HAS NO RIGHTS OR BUSINESS INTERESTS
IN THE COMPANY OTHER THAN THE PROPERTY OWNERS
ALE DROPERTY IS LOCATED IN POLIC COUNTY FLORIDA
PARCEL I.D NUMBERS: - 27-28-28-847000-000300 27-28-28-847000-000320
27-28-28-847000 -000320
E. Effective date, if other than the date of filing: (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.
Dated 11/02/ , 2017.
Signature of a member of supported representative of a member (0° 1)
RAYMOND SHI'M
Typed or printed name of signee
· · · · · · · · · · · · · · · · · · ·

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Filing Fee: \$25.00