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COVER LETTER

Division of Corporations								
SUBJECT: A Smith & Young Experience 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:								
Melissa Smith Name of Person								
Firm/Company								
14292 AMESLOY AVE								
Post Charlotte FL 33981 City/State and Zip Code								
50 Uther NSIN @ Hot MAIL, COM E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
Melissa Smith at (941) 623-5925 Name of Person at (941) Daytime Telephone Number								
Enclosed is a check for the following amount:								
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, 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 OF

A Smith & Young (Name of the Limited Liability Go) (A Florida Limit	ited Liability Gompany's It now appears on our records. (A Florida Limited Liability Company) itability Company were filed on August 24, 2017 and assigned 3, 1193. Itowing: Ito the limited liability company here: ENCE LLC words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." reable: ET ADDRESS) BOX) For registered office address on our records, enter the name of the new office address here: Enter Florida street address Florida	
The Articles of Organization for this Limited Liability Compa Florida document number <u>L17060181193</u> .	any were filed on August	.24, 2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited I A SMITH EXPERIENCE L The new name must be distinguishable and contain the words "Limited L		LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		1
(Principal office address MUST BE A STREET ADDRESS	2	
Enter new mailing address, if applicable:		FILLEL DW 30 A
(Mailing address MAY BE A POST OFFICE BOX)		1 38 0 38
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l		rds, enter the name of the new
Name of New Registered Agent:	,	
New Registered Office Address:	Enter Florida street add	ress
rice registered office Address.		
	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.

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 **Address** Type of Action Name Melissa Smith AMBR □ Remove ☐ Change AMBR Megan L ReenDers 5282 Wiltshire Dr DANG **Æ**Remove ☐ Change MGR Megan L REENDERS 8282 Wiltshill DE Remove Post Charlette Fl 339 RI ☐ Change □ Add ☐ Remove ☐ Change ☐ Remove □ Change

If amending any other		-		-		
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Effective date, if other to an effective date is listed, the Note: If the date inserted document's effective date	e date must be specific an in this block does not:	d cannot be prior to meet the applicat	date of filing or mor		nal) iling.) Pursuant to 60	
e record specifies a The 90th day after			an effective tir	me, at 12:01 a.	m. on the earl	lier of
Dated NOVEMB						
Me	Signature of a	member or author	zed representative o	f a member		
	Melissa	5mit	-h			

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Filing Fee: \$25.00