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### **COVER LETTER**

Division of Co	rporations		
SVM Palm SUBJECT:	Coast, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Mease return all correspo	ondence concerning this matter	to the following:	
	Andrew C. Grant, Esq.		
		Name of Person	<del></del>
	Chiumento Dwyer Hertel	Grant & Kistemaker, P.L.	
		Firm/Company	
	145 City Place, Suite 301		
		Address	
	Palm Coast, FL 32164		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	UShah7@gmail.com		
	E-mail address; (	to be used for future annual report notifi	cation)
For further information of	oncerning this matter, please of	all:	
Caroline McNeil		at () 445-8900 ext Area Code Daytime	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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:

TO:

**Registration Section** 

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

SVM Palm Coast, LLC			
( <u>Name of the Limite</u>	d Liability Compa A Florida Limited	any as it now appears on our reco Liability Company)	rds.)
The Articles of Organization for this Limited Lia	ability Company	were filed on 03/07/2018	and assigned
Plorida document number L18000060678			
his amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	nility company here:	
he new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	10 Kingswood Drive	
Principal office address MUST BE A STREET	(ADDRESS)	Palm Coast, FL 32137	2018 3EC
	· · · · · · · · · · · · · · · · · · ·		AAH AP
Enter new mailing address, if applicable:		10 Kingswood Drive	APR 25 PH
Mailing address MAY BE A POST OFFICE B	BOX)	Palm Coast, FL 32137	
	<del></del>		
B. If amending the registered agent and/o egistered agent and/or the new registered off	or registered of ice address her	ffice address on our recore e:	ds, enter the name of the no
Name of New Registered Agent:	Upendra Shah		
New Registered Office Address:	10 Kingswood	Drive	
		Enter Florida street addre	ess
	Palm Coast	, F	Florida 32137
		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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SVMU Palm Coast, LLC	10 Kingswood Drive	□ Add
		Palm Coast, FL 32137	☐ Remove
3			☐ Change
			Add
			Remove
			□ Change
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		<del></del>	Change
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ctive date, if other than the date of filing:	ng.) Pursuant to 605.	prior to date of filing or more than 90 days after filing.) Pur pplicable statutory filing requirements, this date will	fective date is listed, the date must be specific ar If the date inserted in this block does not
ecord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the $\epsilon$ ie 90th day after the record is filed.	n. on the earlie	t not an effective time, at 12:01 a.m. on t	cord specifies a delayed effective 90th day after the record is filed
d April 19 2018  When after shah  Signature of a member or authorized representative of a member			April 19
• / /			

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Filing Fee: \$25.00