L18000205950

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Advanced Incorporating Service

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: wlopez@aisincfl.com Website: www.aisincfl.com

SMDP Fund (C
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SMDP FUND, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SELECTAL AHASSEE, ET

The Articles of Organization for this Limited Liability Comp Florida document number <u>L18000205950</u> .	any were filed on $\frac{08/2i}{2}$	3/2018 and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	liability company her	2:			
The new name must be distinguishable and contain the words "Limited !	iability Company," the des	ignation "LLC" or the abbreviation "L.1, C."			
Enter new principal offices address, if applicable:	3959 VAN DYKE ROAD SUITE 386				
(Principal office address MUST BE A STREET ADDRESS	1.UTZ. FL 33558				
Enter new mailing address, if applicable:	3959 VAN DYKI	EROAD SUITE 386			
(Mailing address MAY BE A POST OFFICE BOX)	LUTZ, FL 33558				
B. If amending the registered agent and/or registered office and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	ce address on our rec	ords, enter the name of the new registered			
	Enter Florid	a street address			
	City	Florida Zıp Code			
New Registered Agent's Signature, if changing Registered Age		гар Соме			
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	agree to act in this ca lete performance of m as provided for in Ch	y duties, and I am familiar with and apter 605, F.S. Or, if this document is			
IFC	Thanging Registered Agen	t, 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	SCOTT WALSH	17539 DARBY LANE	□Add
		LATEZ, FL 33558	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□Change
MGR	CHARLOTTE GIVENS	3959 VAN DYKE ROAD SUITE 386	= Add
		LUTZ, FL 33558	□Remove
			Change
			🗆 Add
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		-	□Add
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Effective date, if other than the differ effective date is listed, the date must be Note: If the date inserted in this block.	e specific and	d cannot be prie	or to date of	tiling or more th	(option	filing.) Pursuant	to 605,020 se fisted a
document's effective date on the Dep				any ming req	anements unc	dute William	A HALO II
e record specifies a delayed effective d is filed.	late, but not	t an effective	time, at 12	:01 a.m. on th	e earlier of: (b) The 90th da	y after the
Dated NOVEMBER 30		. 2022	·				
_Charlotte Gii	enature of a	member or aut	horized renr	esentative of a	nember	<u> </u>	

Filing Fee: \$25.00