L19CCC1C5486

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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Divisi	on of Cor	porations			
S	&W Man	agement, LLC			
SUBJECT: _		Name of Lim	ited Liability Company		
The enclosed A	articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return al	ll correspo	ndence concerning this matter	to the following:		
		Courtney Bass			
			Name of Person		
		Langdale Vallotton, LLP			
		•	Firm/Company		
		1007 N. Patterson St.			
			Address		
		Valdosta, GA 31601			
			City/State and Zip Code		
		cbass@langdalelaw.com			
			to be used for future annual	report notificat	ion)
For further infe	rmation c	oncerning this matter, please e	all:		
Courtney Bas	ss			4-5400	
	Name o	f Person	at () Area Code	Daytime Te	lephone Number
Enclosed is a cl	heck for th	ne following amount:			
■ \$25.00 Fili	ing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee of Certified Copy (additional copy is enc		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis	ng Addres Stration S	Section	_	ation Section	
	sion of C Box 632	orporations 7		n of Corpor ntre of Tall:	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

얼

S&W Management, LLC				20 人	71
(Name of the Limite	d Liability Compa A Florida Limited l	iny as it now appe Liability Company	ars on our records.)	2000	w
The Articles of Organization for this Limited Liz Florida document number L19000105486	ability Company	were filed on 4	1/17/2019	F Chand assign	,
This amendment is submitted to amend the follo	wing:			STATE OF))
A. If amending name, enter the new name of	the limited liab	ility company	here:		
Smith & Smith Management, LLC					
The new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the	designation "LLC" or the	abbreviation "L.L.C	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2423 Los Ro	bles Drive		
		Fernandina Beach, FL 32034			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>30X)</u>	2423 Los Ro Fernandina I	obles Drive Beach, FL 32034		_
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:	_	th	records, enter the na	ame of the new r	<u>egistered</u>
New Registered Office Address:			lorida street address		
	Fernandina Bo		Florida	32034	
		City	i iyi ida _	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	JAMES MATTHEW SMITH, JR.	360 Honeymoon Lane, Waycross, GA 31503	= Add
			□Remove
			□Change
AMBR	SUMMER SMITH	5548 First Coast Highway, Suite 200	□Add
		Fernandina Beach, FL 32034	
			□Change
			🖸 Add
			□Remove
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Filing Fee: \$25.00