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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

9 802	Email Address:	·······	
CEIVED	LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SMART KITCHEN LLC		
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* ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SMART KITCHEN LLC (<u>Name of the Limited Liability Company as it now appear</u> (A Florida Limited Liability Company)	s on our records.)
(A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on	and assigned
Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company he	<u>ere</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the d	esignation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
Enter new principal offices address, if applicable:	
Enter new principal offices address, if applicable: <u>(Principal office address MUST BE A STREET ADDRESS)</u>	
(Principal office address MUST BE A STREET ADDRESS)	

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	ress
	City	Florida

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>	Name	Address	Type of Action
MGR	Vanessa Fischer	941 NE 73rd St	🖹 Add
		Miami, FL 33138	Remove
			Change
			Change
			□Remove
			Change
			Change
			🗆 Add
			🗍 Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than	a the date of filing:	(optional) ig or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in t	his block does not meet the applicable statutor	y 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 ef record is filed.	fective date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
Dated	2021	
	\$	

Signature of a member or authorized representative of a member

Saray Djidji, Attorney in Fact

Typed or printed name of signee