## 119000195125

|                        | (Requestor's Name)            | <u> </u> |
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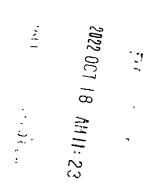
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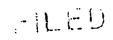
## **COVER LETTER**

TO:

|                             |  | ١                                      |  |
|-----------------------------|--|--|--|
|                             | CE CARTEL LLC  |  |  |
| SUBJECT:                    | Name of Limi   | ted Liability Company                  |  |
| The enclosed Articles of    | Amendment and fee(s) are sub-  | mitted for filing.                     |  |
| Please return all correspo  | ndence concerning this matter  | to the following:                      |  |
|                             | Charles William Bolen  |  |  |
|                             | · · · · · · · · · · · · · · · · · · ·  | Name of Person                         | <del></del>                            |
|                             | BJECT:  THE SMOKE CARTEL LLC  Name of Limited Liability Company  e enclosed Articles of Amendment and fee(s) are submitted for filing.  mase return all correspondence concerning this matter to the following:  Charles William Bolen  Name of Person  THE SMOKE CARTEL LLC  Firm/Company  564 Vista Ridge Drive  Address  Ruskin, Florida 33570  Chy/State and Zip Code  charlesbolen4 l@gmail.com  T-mail address: (to be used for future annual report notification)  r further information concerning this matter, please call:  arles Bulen  Name of Person  Area Code  Daytine Telephone Number  closed is a check for the following amount:  E 525.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Mailing Address: Registration Section Division of Corporations  Street Address: Registration Section Division of Corporations |  |  |
|                             |  |  |  |
|                             |  |  |  |
|                             |  | Address                                |  |
|                             | Ruskin, Florida 33570  |  |  |
|                             | THE SMOKE CARTEL LLC  Name of Limited Liability Company  If Articles of Amendment and fee(s) are submitted for fitting.  It all correspondence concerning this matter to the following:  Charles William Bolen  Name of Person  THE SMOKE CARTEL LLC  Firm-Company  564 Vista Ridge Drive  Address  Ruskin. Florida 33570  City/State and Zip Code  charlesbolen41@gmail.com  E-mail address: (to be used for future annual report notification)  Information concerning this matter, please call:  en  1941  Name of Person  Name of Person  Area Code  Certificate of Status  Certificate of Status  Certificate Opy  (additional copy is enclosed)  Infiling Address:  Ingistration Section  Vision of Corporations  Name of Corporations   |  |  |
|                             |  |  |  |
|                             | E-mail address: (  | to be used for future annual report no | lification)                            |
| For further information c   | oncerning this matter, please ca   | all:                                   |  |
| Charles Bolen               |  |  |  |
| Name o                      | f Person   | Area Code Daytii                       | ne Telephone Number                    |
| Enclosed is a check for the | ne following amount:   |  |  |
| ■ \$25.00 Filing Fec        |  | Certified Copy                         | Certificate of Status & Certified Copy |
|                             |  |  |  |
| _                           |  | <del>-</del>                           |  |
| P.O. Box 632                | -  |  | •                                      |
| Tallahassee,                | FL 32314   | 2415 N. Monr                           | oe Street, Suite 810                   |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 OCT 18 AMIL: 25

| THE SMOKE CARTEL LLC   |   | <u> </u>                     |
|--|---|------------------------------|
| ( <u>Name of the Limited Liability C</u><br>(A Florida Lin   | Company as it now appears on our records.<br>mited Liability Company) | )                            |
| The Articles of Organization for this Limited Liability Com  | npany were filed on 07/31/2019  | and assigned                 |
| lorida document number L19000195125  |   |                              |
| his amendment is submitted to amend the following:   |   |                              |
| . If amending name, enter the new name of the limited  | d liability company here:   |                              |
| Charlie B Photography LLC  |   |                              |
| he new name must be distinguishable and contain the words "Limited   | I Liability Company," the designation "LLC"                           | or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:  |   |                              |
| <u>Principal office address MUST BE A STREET ADDRES</u>  | <u> </u>  | <u> </u>                     |
|  |   |                              |
|  |   |                              |
| Enter new mailing address, if applicable:  |   |                              |
| Mailing address MAY BE A POST OFFICE BOX)  |   |                              |
|  |   |                              |
|  |   |                              |
| <ol> <li>If amending the registered agent and/or registered of<br/>agent and/or the new registered office address here:</li> </ol> | ffice address on our records, <u>enter t</u>                          | he name of the new regi      |
| gent and/or the new registered office address here.  |   |                              |
| Name of New Registered Agent:  |   |                              |
|  |   |                              |
| New Registered Office Address:   | Enter Florida street address  |                              |
|  | L'I.  | rido                         |
| <del></del>  | , F10   | ridaZip 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 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 |
|--------------|-------------|--------------|----------------|
|              |             |              | □Add           |
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| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the rd is filed.  10/17/2022 08:30 AM  |                    | •  |                 |                 |                  |                                     |                                       |  |               |
|--|--------------------|--|-----------------|-----------------|------------------|-------------------------------------|---------------------------------------|--|---------------|
| Effective date, if other than the date of filing:  [In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  Precord specifies a delayed effective date, but not an effective time, at 12:01 a.in, on the earlier of: (b) The 90th day after the dis filed.  Dated  Output  Output |                    |  |                 |                 |                  |                                     |                                       |  |               |
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| Dated 10/17/2022 , 08:30 AM  | Note: If the date  | e inserted in this h                       | block does not  | meet the appli  | icable statutory | gor more than 90<br>filing requiren | days after filing<br>nents, this date | .) Pursuant to 605.<br>will not be liste | 0207<br>ed as |
| Okato William Delen  | e record specifies | ; a delayed effecti                        | ve date, but no | ot an effective | time, at 12:01 ; | a.m. on the earl                    | tier of: (b) Tl                       | ne 90th day after                        | the           |
| The water 12000  | d is filed.        |  |                 | 08:30 AM        |                  |                                     |                                       |  |               |
| Signature of a member or authorized representative of a member   | 10/17/202          | ?2<br>———————————————————————————————————— | ,               | .,              | <del></del> ·    |                                     |                                       |  |               |
|  | 10/17/202          | an Anto                                    | Wille           | lim 1           | Eden             | ν <u></u>                           |                                       |  |               |