

OCT/16/2020/FRI 08:35 AM

10/16/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : WARD, DAMON & POSNER, P.A.
Account Number : 072262000447
Phone : (561)842-3000
Fax Number : (561)842-3626

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

Email Address: mysmaxfamily@gmail.com

FILED
2020 OCT 16 AM 8:33
TALLAHASSEE

REGISTERED AGENT CHANGE
SMAX PROPERTIES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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OCT 19 2020

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2020 OCT 16 AM 10:08

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FAX No.

P. 002

COVER LETTER

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**TO: Registration Section
Division of Corporations**

SUBJECT: SMAX Properties, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sasha Klein

Name of Person

Ward Damon

Firm/Company

4420 Beacon Circle

Address

West Palm Beach, FL 33407

City/State and Zip Code

mymaxfamily@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sasha Klein

at (443) 831-4880

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

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SMAX Properties, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 09/19/2019 and assigned
Florida document number L19000237414.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

46 Golfview Road

Tequesta, FL 33469

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:

Carey Gable

New Registered Office Address:

4420 Beacon Circle

Enter Florida street address

West Palm Beach,

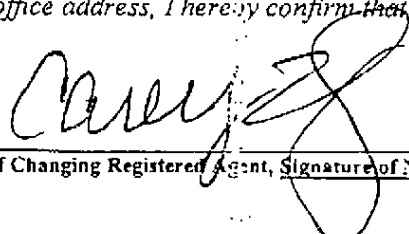
Florida 33407

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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Sasha Klein	803 Floret Drive	<input type="checkbox"/> Add
		Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mark Parthemer	803 Floret Drive	<input type="checkbox"/> Add
		Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ellen Lissauer	46 Golfview Road	<input checked="" type="checkbox"/> Add
		Tequesta, FL 33469	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: 10/16/2020 (optional)
(If an 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 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory 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 effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated October 16 2020

Signature of a member or authorized representative of a member

Sasha Klein

Typed or printed name of signee

Filing Fee: \$25.00

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