

L 19 000 248 734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

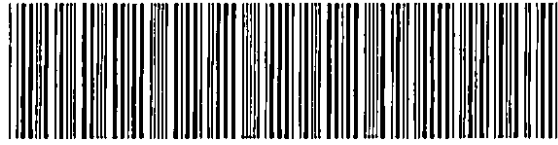
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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2020

SMILER CLUB LLC
2750 TAYLOR AVE STE A45
ORLANDO, FL 32806

SUBJECT: SMILER CLUB LLC
Ref. Number: L19000248734

We have received your document for SMILER CLUB LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 220A00004587

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SMILER CLUB 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:

DOW MILLER

Name of Person

SMILER CLUB LLC

Firm/Company

2750 TAYLOR AVE, SUITE A-45

Address

ORLANDO, FL 32806

City/State and Zip Code

dow@thesmilers.club

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

For further information concerning this matter, please call:

DOW MILLER

Name of Person

at (**256**) **506-4004**

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SMILER CLUB 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 10/01/2019 and assigned
Florida document number L19000248734

This amendment is submitted to amend the following:

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

THE SMILERS CLUB LLC

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:

2750 TAYLOR AVE STE A45

(Principal office address MUST BE A STREET ADDRESS)

ORLANDO, FL 32806

Enter new mailing address, if applicable:

2750 TAYLOR AVE STE A45

(Mailing address MAY BE A POST OFFICE BOX)

ORLANDO, FL 32806

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:

FREEMAN, MARK A, ESQ

New Registered Office Address:

2750 TAYLOR AVE STE A5

Enter Florida street address

ORLANDO

City

Florida

32806

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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>DOW MILLER</u>	<u>2750 TAYLOR AVE STE A45</u>	<input type="checkbox"/> Add
		<u>ORLANDO, FL 32806</u>	<input type="checkbox"/> Remove
		_____	<input checked="" type="checkbox"/> Change
		_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
		_____	<input type="checkbox"/> Add
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