N19000286249

(Re	questor's Name)	
(Add	dress)	
(Ad-	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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COVER LETTER

Divi	ision of Cor	porations					
CHB ILZYE	Smokin' Royalty LLC						
SUBJECT:	Name of Limited Liability Company						
The enclosed	L Articles of	Amendment and fee(s) are sub-	nitted for tiling				
Please return	all correspo	ndence concerning this matter	to the following:				
		Daniella James					
	Name of Person						
	Smokin' Royalty LLC						
	Firm/Company						
	10910 N 30th Street, Unit 103						
Address Tampa, FL 33612							
						City/State and Zip Code	
		smokin.royaltylle@gmail.com E-mail address: (to be used for future annual report notification)					
For further in	aformation c	oncerning this matter, please ca					
Stella M Sau	inders		813 734-1389 at ()				
	Name o	f Person	Area Code Daytime Te	elephone Number			
Enclosed is a	ı check for tl	ne following amount:					
□ \$25.00 F	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)			
	iling Addres		Street Address: Registration Section	on			
Division of Corporations			Division of Corpo				

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

TO:

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

Smokin' Royalty LLC			
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appear ability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company v Florida document number 1.19000286249	vere filed on No	ovember 18, 2019	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the d	esignation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		<u>-</u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office at agent and/or the new registered office address here:	ldress on our r	ecords, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Flor	ida street address	
		, Flori	da
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of rovided for in C	my duties, and Thapter 605, F.,	I am familiar with and S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Daniella A James	10910 N 30th St, Unit 103, Tampa, FL 33612	≣ Add
			□Remove
			□Change
AMBR	Ahmoi Lewis		🗆 Add
		10910 N 30th St, Tampa, FL 33612	■Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change

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: ___ _ (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

Daniella A James

Typed or printed name of signee

Filing Fee: \$25.00