

120000002395

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

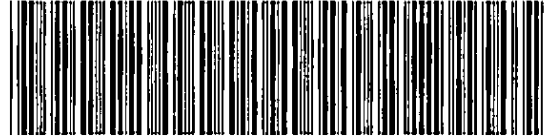
(Business Entity Name)

(Document Number)

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2022 JUL -5 PM 8:30

cf 10/16/2022

COVER LETTER

TO: ► Registration Section
Division of Corporations

SUBJECT: SMRT FURNITURE 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:

Bill Havre

Name of Person

SMRT Furniture LLC

Firm/Company

7901 4th St N Ste 300

Address

St. Petersburg FL 33702

City/State and Zip Code

agent@floridaregisteredagent.com

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

For further information concerning this matter, please call:

Bill Havre

Name of Person

561 8051103
at ()
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

SMRT Furniture LLC

2022.03.15 AM 8:30

(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 12/20/2019 and assigned
Florida document number L20000002395.

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)

Registered Agents Inc.

7901 4th St N, STE 300

St. Petersburg, FL 33702

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FL 33702 Registered Agents Inc.

7901 4th St N, STE 300

St. Petersburg, FL 33702

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:

Registered Agents Inc.

New Registered Office Address:

7901 4th St N, STE 300

Enter Florida street address

St. Petersburg

City

Florida FL 33702

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.

Bill Havre

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>
AMBR	Margalit Amar	1751 Palm Beach Lakes Blvd	<input type="checkbox"/> Add
		E116, West Palm Beach, FL 33401	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Tomer Amar	7901 4th St N STE 300	<input checked="" type="checkbox"/> Add
		St. Petersburg FL 33702	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Gabriela Perez	7901 4th St N Ste 300	<input checked="" type="checkbox"/> Add
		St. Petersburg FL 33702	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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