(Requestor's Name)	_
(Address)	<u></u>
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
Special Instructions to Filing Officer	_

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2021 AUG 1 1 PM 12: 45

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195	
REFERENCE : 952964 8058028	
AUTHORIZATION : Spelle le man	
COST LIMIT : (\$ 25.00	
	-
ORDER DATE : August 11, 2021	
ORDER TIME : 9:20 AM	
ORDER NO. : 952964-010	
CUSTOMER NO: 8058028	
DOMESTIC AMENDMENT FILING	
NAME: ESMARTKEEP LLC	
EFFECTIVE DATE:	
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

COVER LETTER

TO: Registration Section Division of Corporations			
ESMART SUBJECT:	KEEP LLC		
30BJEC1:	Name of Li	mited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	abmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
	Sandra York		_
		Name of Person	
	SANDRA YORK, PLLC		
		Firm/Company	
	133 Grand Avenue, Suite	A	
		Address	
	Coral Gables, FL 33133		
		City/State and Zip Code	
	sandra.york@yorkpllc.com		
		(to be used for future annual report noti	lication)
For further information	concerning this matter, please	CAII:	
Sandra York		786 266-3301 at ()	
Name (of Person		e Telephone Number
Enclosed is a check for t	he 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 Addres		Street Address:	
Registration :		Registration Sec	
I DVSCIAD AT (02502000000	Division of Com	a androne

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

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

(Name of the Limit	(ed Liability Company as it now appear (A Florida Limited Liability Company)	ra on our records.)
he Articles of Organization for this Limited L lorida document number L20000015598		
his amendment is submitted to amend the fol	lowing:	
. If amending name, enter the new name (of the limited liability company h	<u>ere</u> :
VA		
he new name must be distinguishable and contain the	words "Limited Liability Company," the o	lesignation "LLC" or the abbreviation "LLC."
nter new principal offices address, if appli	icable: N/A	
Principal office address MUST BE A STRE	•	
	 -	
	21/4	
nter new mailing address, if applicable:	<u>N/A</u>	
<u>Mailing address MAY BE A POST OFFICE</u>	<u> </u>	
		. 1
B. If amending the registered agent and/or	registered office address on our r	ecords enter the name of the new region
gent and/or the new registered office addr		-
Name of New Registered Agent:	SANDRA YORK, PLLC	
New Registered Office Address:	33 Grand Avenue, Suite A	11.
Mew Verlinder Olive Manneys.	Enter Flo	rida street address
·	Coral Gables	, Florida ³³¹³³
	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

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

Title	Name	Address	Type of Action
MGR	Carlos E. Garvia	66 W FLAGLER ST STE 900	
		MIAMI, FL 33130	□ Remove
			☐ Change
			🗆 Add
			Remove
			Change
			□Add
			□Remove
			Change
		 	
			□ Remove
			Change
<u>_</u>			□Add
			Remove
			Change
			(Add
			□ Remove
			□ Change

Article / 01	the Articles of Organization is hereby deleted in its entiretity.
The Compa	ny shall be managed by a manager or manager(s) in accordance with regulations adopted
by the mem	ber(a) for the management of the business and affairs of the Company. These regulations may contain
any provisio	ns for the regulation and management of the affairs of the Company not inconsistent with law
or these Arti	icles of Organization.
No other art	icles, sections, terms or conditions of the Articles of Organization have been changed.
-	
ffective date is If the date i	other than the date of filing:
ord specifies a filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
August 10	, 2021
	Signature of a member ocautholized representative of a member

Filing Fee: \$25.00