L20000098656

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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DIVISION OF CORPORATIONS

2023 HOV - 1 PH 3: NO

Y. SCOTT NOV - 2 2023



October 7, 2023

SHAUN PURVIS 12311 TAVARES RIDGE LANE TAVARES, FL 32778 FILED IN ERROR

Letter Number: 823A00023249

SUBJECT: SM CONSULTING LLC Ref. Number: L20000098656

We have received your document for SM CONSULTING 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6053.

Yvette Scott Supervisor

www.sunbiz.org

COVER LETTER

TO: Registration Section
Division of Corporations

FILED IN ERROR

S&M CONS	SULTING LLC	TIEED II (E)	idtoit	
SUBJECT:		ted Liability Company		
The enclosed Articles of a	Amendment and fee(s) are sub-	nitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	SHAUN PURVIS			
		Name of Person		
	S&M CONSULTING LLC			
		Firm/Company	•	maning to the second se
	12311 TAVARES RIDGE	LANE		SECRETION CO
		Address		- A01-
	TAVARES FLORIDA 327		·	-1 -
	SMPTHUNDER@YAHOO	City/State and Zip Code		PH 3:
	E-mail address: (to be used for future annual report not	ification)	3: 09
For further information c	oncerning this matter, please ca	all:		
SHAUN PURVIS		352 408-5915 at ()		
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Fili Certificate	ng Fee, of Status &

Mailing Address:

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

Street Address:

(additional copy is enclosed)

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

Certified Copy (additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

S&M CONSULTING LLC (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 9/19/23	and assigned
lorida document number L20000098656.		
his amendment is submitted to amend the following:	FILED IN ERF	ROR
A. If amending name, enter the new name of the limited liab	ility company here:	
S&M ENGINEERING CONSULTING LLC		
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "L1.C" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		SEDR VIS.03 23 1 10
Principal office address MUST BE A STREET ADDRESS)		<u>▼ 277</u>
		<u> </u>
		HA Second
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		33.6
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	name of the new reg
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	0
	, r ioriu	A

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 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

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<u>Title</u>	Name	Address	Type of Action
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			□Remove
			□Add
			□Remove
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estive data if other than the	date of filing:			(optional)	
ective date, if other than the effective date is listed, the date mu	st be specific and cannot b	e prior to date of fil	ing or more than 90 da	ys after filing.) Pursu	ant to 605.0
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cord specifies a delayed effective	ve date, but not an effec	ctive time, at 12:0	1 a.m. on the earlie	r of: (b) The 90th	day after
s filed.					
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ed 10/23	, 2023	·			
	110	-			
	WILLIAM DOG	_			
 	Signature of a member	or authorized repres	sentative of a member		