

L20000347971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

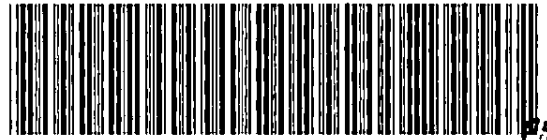
(Business Entity Name)

(Document Number)

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JAN 21 A 11:37

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01/21/21--01017--006 --25.00

DEPT OF STATE
TALLAHASSEE, FLORIDA

JAN 21 PM 2:54

RECORDED

LLC
Amend.

JAN 22 2021
D. CONNELL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SmoothFit Group 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:

Darryl L. Richardson

Name of Person

SmoothFit Group LLC

Firm/Company

20245 NE 15TH Ct

Address

MIAMI FL, 33179

City/State and Zip Code

bd.oS@cinception.com

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

For further information concerning this matter, please call:

Raquel Cave

786

584-8884

at ()

Name of Person

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**

SmoothFit Group 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 11/02/2020 and assigned
Florida document number 1.20000347971.

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)

20245 NE 15TH Court

#B6

Miami, Florida 33179

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

20245 NE 15TH Court

#B6

Miami, Florida 33179

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:

ElNception LLC

New Registered Office Address:

20245 NE 15TH CT #B1

Enter Florida street address

Miami

Florida 33179

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

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------------------|------------------|--|
| MGRM | Darryl L. Richardson Jr | 20245 NE 15TH Ct | <input type="checkbox"/> Add |
| | | #B6 | <input type="checkbox"/> Remove |
| | | Miami, FL 33179 | <input checked="" type="checkbox"/> Change |
| MGRM | Darryl L. Richardson | 20245 NE 15TH Ct | <input checked="" type="checkbox"/> Add |
| | | #B6 | <input type="checkbox"/> Remove |
| | | Miami, FL 33179 | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

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.

[Handwritten signature]

Darryl L. Richardson JR

Typed or printed name of signee