KZ1000349338

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bı	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	





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09/28/21--01035--003 **25.00



COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJEC	ct: <u>SMART</u>	KONTENT US	SA LIC		
		Name of Limit	ted Liability Company		
The enc	losed Articles of Amendmer	nt and fee(s) are subr	nitted for filing.		
Please r	eturn all correspondence cor	icerning this matter t	o the following:		
		NATE	ILIA MARTINEZ		_
			Name of Person		
			Firm/Company	<u> </u>	_
	84	<u>XOI SW 94th</u>	STREET APT. 2	25 N	_
		MIAMI	FL 33156 City/State and Zip Code		_
			A management of be used for future annual rep	6 Gmail. Com	-
For furt	her information concerning t	his matter, please ca	ili:		
	NCHAlia Mark Name of Person	inet	at (<u>786)</u> <u>715</u> Area Code	5- 9384 Daytime Telephone Numb	oer
Enclose	d is a check for the followin	g amount:			
VZ \$25		00 Filing Fee & tiffcate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclose	ed) Certifi	Filing Fee, cate of Status & ed Copy nal copy is enclosed)
	Mailing Address: Registration Section		<u>Street Addı</u> Registrati	ress: on Section	
	Division of Corporation	ons		of Corporations	

P.O. Box 6327

F.,

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

SMART KONTENT	USA LIC	
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number <u>L 21000349338</u> .		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	18470 SW 83RD AVENU	e
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33157	
Enter new mailing address, if applicable:	18470 SW 83RD AVED	<u>ue</u>
(Mailing address MAY BE A POST OFFICE BOX)	<u>Miami, FL 33157</u>	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u> </u>
	Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		Çû.

If Changing Registered Agent, Signature of New 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change

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n effecti <u>ite:</u> If t	date, if other than the date of filing:
recor he 90	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier Oth day after the record is filed.
ted	August 26 2021
	Signature of a member or authorized representative of a member
	Natalia Martinez

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