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## **COVER LETTER**

	egistration Servision of Corp			
CUD IECT		erties of Palm Beach LLC		
SUBJECT		Name of Lin	nited Liability Company	
The enclose	ed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please retur	n all correspon	ndence concerning this matter	to the following:	
		Stephen Smith		
		-	Name of Person	
		Smith Properties of Palm I	Beach LLC	
		-	Firm/Company	2024 SEC
		102 NE 2nd St, Suite 201		2024 HAR -7 AN 10: 34 SECRETARY OF STATE TALLAHASSEE, FL
			Address	
		Boca Raton, FL 33432		
		smithpropertiesfl@gmail.co	City/State and Zip Code	0: 34 STATE
		E-mail address: (	to be used for future annual report notification	on)
For further	information co	oncerning this matter, please c	all:	
Stephen Sm	nith		954 278-0122 at ( )	
	Name of	Person		ephone Number
Enclosed is	a check for th	e following amount:		
<b>≅</b> \$25.00	Filing Fee	S30.00 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)
Re Di P.	ailing Address egistration S ivision of Co O. Box 632' allahassee, F	ection orporations 7	Street Address: Registration Section Division of Corpora The Centre of Talla 2415 N. Monroe Str Tallahassee, FL 323	ations hassee reet, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Smith Properties of Palm Beach LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)	
he Articles of Organization for this Limited Liability Company	were filed on December 14, 2021	and assigned
orida document number L21000525124		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	lity company here:	
e new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		<u> </u>
rincipal office address MUST BE A STREET ADDRESS)		SECRET THAR
		70 mm
		52 J
iter new mailing address, if applicable:		<b>200</b>
failing address MAY BE A POST OFFICE BOX)	<del></del>	mo o
and the second s		
		<del></del>
If amending the registered agent and/or registered office a	ddress on our records, enter the	name of the new register
ent and/or the new registered office address here:		-
Name of New Registered Agent:		
New Registered Office Address:		
Nogistored Office Paddess.	Enter Florida street address	
	, Florid	la
	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 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>	Name	Address	Type of Action
AMBR	Fiorella Rondon	102 NE 2nd Street, Suite 201	<b>=</b> Add
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	Jui	ly 26, 2023			
ctive date, if other than the	e date of filing:	·	f filing or more than 9	(optional) 0 days after filing.)	Pursuant to 605.03
: If the date inserted in this iment's effective date on the	olock does not meet t	he applicable stat			
ord specifies a delayed effect	ve date, but not an el	fective time, at 1	2:01 a.m. on the ea	rlier of: (b) The	90th day after t
filed.					
March 4	20	24			
d	1 <u></u>	•			
/ i/c	we het	· /			
( )	Signature of a memb				