

L22000110441

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

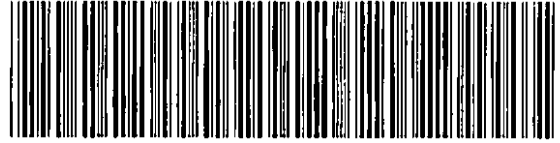
(Business Entity Name)

(Document Number)

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2022 MAR 31 PM 3:18

2022 MAR 31 AM 9:05

SECRETARY OF STATE
TALLAHASSEE, FL

FILED

cf 4/1/2022

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 03/31/2022

Acc#I20160000072

en: c DW

Name:	SMNM Holding, LLC
Document #:	
Order #:	14246400 - 5

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
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Amount: \$ **25.00**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SMNM HOLDING, 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:

JANE SONKIN
Name of Person
SMNM HOLDING, LLC
Firm/Company
2255 GLADES ROAD, SUITE 324A
Address
BOCA RATON, FL 33431
City/State and Zip Code
janesvirski@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRUCE ROSETTO at (561) 650-7940
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

FILED

2022 MAR 31 AM 9:05

SMNM HOLDING, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

NOTICE OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 03/17/2022 and assigned
Florida document number L22000110441.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____

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

