L22000273146

(F	Requestor's Name)	
	Address)	
V	(duress)	
(<i>F</i>	Address)	
 		
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
	Document Number)	
(L	Jocument Number)	
Certified Copies	Certificates of	Status
		
Special Instructions t	o Filing Officer:	
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	J. HORNE	
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2022 JUN 21 PM 4: 11

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WALK IN

	PICK	UP: <u>6/21 DANNY</u>
XX	CERTIFIED COPY	
	РНОТОСОРУ	
XX	CUS	GS
XX	FILING	LLC AMEND
	CSG SMITH, LLC (CORPORATE NAME AND DOCUM	IENT #)
	(CORPORATE NAME AND DOCUM	IENT #)
	(CORPORATE NAME AND DOCUM	IENT #)
	(CORPORATE NAME AND DOCUM	IENT #)

COVER LETTER

TO: Registration Division of (i Section Corporations		
SUBJECT:	CSG Sr	nith, LLC	
		Limited Liability Company	
The enclosed Articles	of Amendment and fee(s) are	submitted for filing.	
	pondence concerning this mat		
	Jacqu	eline Smith	
	· ·	Name of Person	
		Firm/Company	
	3148 P	Seaver Pond To	<i>(</i> \
	Valrico	, FL 33596	_
	Jacque	City/State and Zip Code Line 9 Smith 20190 (to be used for future annual report not	outlook.com
For further information of	concerning this matter, please		ification)
Jacquelin Name o	e Smith	at (813) 305. Area Code Daytim	5259
		Dayfin	e Telephone Number
Enclosed is a check for th	e following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	(6	
Registration Se	- ection	Street Address:	

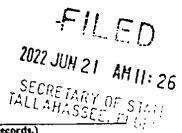
Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



CSG Smith, LLC	TALLAHASSEE, FI
(Name of the Limited Liability Company as It now appears on our (A Florida Limited Liability Company)	records.)

The Articles of Organization for this Limited Liability Company Florida document number <u>L 2 2 000273146</u>	were filed on May 09, 2027	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited list	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the a	bbreviation "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 agent and/or the new registered office address here:	e address on our records, enter the na	me of the new registered
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 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
AMBR	Matthew S. Smith	3148 Beaver Pond Trl.	DAdd
		Valrico, FL 33596	□Remove
			Change
			□Add
		-	□Remove
			Change
			□Add
			🗆 Remove
			Change
			
			□Remove
			Change
	***************************************		Dadd
			□Remove
			Change
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			□Remove
			□ Chausa

Please	add	EIN number	88-2158176
	 		
			
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viva data is listed the	date must be speci	filing:	(optional) r more than 90 days after filing.) Pursuant to 60
f the date inserted it	n this block does	s not meet the applicable statutory fint of State's records.	ling requirements, this date will not be lis
nt, è ettective quie o	it the Departmen	in of Sinte 5 feedles.	
specifies a delayed	effective date, b	ut not an effective time, at 12:01 a.t	n. on the earlier of: (b) The 90th day after
d.		-	•
June "	7 I	2077	
JUNE .	<u> </u>	7,2022	
	Al	Lmth	
	Signatur	e of a member or authorized representa-	ive of a member

Filing Fee: \$25.00