

**L22000345483**  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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(((H22000345483 3)))



H22000345483ABC\*

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 SMARTAGROBUSINESS LLC**

Certificate of Status	0
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2022 OCT 7 11:41:53

DEPARTMENT OF STATE  
 CALL CENTER, FLORIDA  
 2022 OCT - 7 AM 8:51  
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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SMARTAGROBUSINESS 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 09/29/2022 and assigned
Florida document number L22000422320

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: 7389 SW 162ND CT
(Principal office address MUST BE A STREET ADDRESS) Miami, FL 33193

Enter new mailing address, if applicable: 7389 SW 162ND CT
(Mailing address MAY BE A POST OFFICE BOX) Miami, FL 33193

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

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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>
MGR	CARLOS	7389 SW 163 CT	<input type="checkbox"/> Add
		MIAMI, FL 33193	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	VICTOR M. ARBOLEDA	7389 SW 162ND CT	<input type="checkbox"/> Add
		MIAMI, FL 33193	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	MIGUEL A. RODRIGUEZ	7389 SW 162ND CT	<input type="checkbox"/> Add
		MIAMI, FL 33193	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

Multiple horizontal lines for text entry.

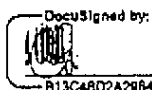
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated 10/7/2022 \_\_\_\_\_



813C4802A206419..

Signature of a member or authorized representative of a member

victor Arboleda

Typed or printed name of signee