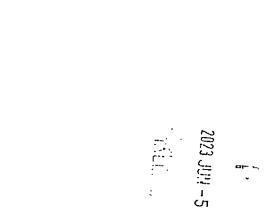
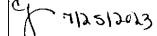
## 

(Req	uestor's Name)	·····
(Adda	ress)	
(Addı	ress)	
(City/	State/Zip/Phone #	)
☐ PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Mame)	
(Doci	ument Number)	<del></del>
Certified Copies	Certificates of	Status
Special Instructions to Fi	ling Officer:	









	Registration Sec Division of Corp				
'eum me		ND & PROPERTY LLC.	٠		
SUBJEC	.1:	Name of Lin	nited Liability Company		
		Amendment and fee(s) are sub	_		
riease rei	turn an correspon	idence concerning this matter	to the following:		
		NICHOLAS LOPEZ			
			Name of Person	rson	
		SMART LAND & PROPI	ERTY LLC.		tion)
			Firm/Company		<del> </del>
		20N ORANGE AVE STE	1100		
			Address		
		ORLANDO, FL. 32801	City/State and Zip Code		
				le	
		smartlandandproperty@gm. E-mail address: (		al report notification	)
For furthe	er information co	neerning this matter, please c		·	
	AS LOPEZ	,		904 6539	
	Name of	Person	at () _ Area Code	Daytime Telep	hone Number
Enclosed	is a check for the	following amount:			
<b>■</b> \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fe Certified Copy (additional copy is e		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u> </u>	Mailing Address:		Street	Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## DocuSign Envelope ID: 0B44700A-74FB-4402-B14F-B188FD349B68 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



2023 HIN -5 PH 5-1-1

SMART LAND & PROPERTY, L	LC.		2 11: 2-41
(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	•••
	(A Florida Limited Liability Company)	12.4	A SEE FL
The Articles of Organization for this Limited I	iability Company were filed on 05/0		_
Florida document number L23000229032	——————————————————————————————————————	<u></u>	and assigned
Fiorida document number	·		
This amendment is submitted to amend the fol	lowing:		
A 16 11			
A. If amending name, enter the new name of	of the limited liability company her	<u>e</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the des	signation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if appli	rable:		
(Principal office address MUST BE A STREI	- <del>-</del>		
Timespar office dualess most be a STREE	. (ADDRESS)		
	<del></del>	<u> </u>	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	BOX		
			<del></del>
B. If amending the registered agent and/or	registered office address on our rec	ords antar the name	of the new registers
igent and/or the new registered office addre		ords, cinci inc name	of the new registers
	<del></del>		
Name of New Registered Agent:	NICHOLAS LOPEZ		
Manie of New Registered Agent.	<del></del>	<del></del>	
New Registered Office Address:			
	Enter Florid	a street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
	· <del>-</del>		
hereby accept the appointment as registere			
provisions of all statutes relative to the prop	er and complete performance of m	ly duties, and I am fa	miliar with and
accept the obligations of my position as regi			
being filed to merely reflect a change in the		confirm that the limi	ted liability
company has been notified in writing of this	change.		
	DocuSigned by	:	
	Neliolas I	OPUS	
	If Changing RegistPreBAQUA	1 2	tered Agent

DocuSign Envelope ID: 0B44700A-74FB-4402-B14F-B188FD349B68

Hamphung Authorized rerson(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

Title	<u>Name</u>	Address	Type of Action
MGR	NICHOLAS LOPEZ	7105 NW 53RD TERRACE, MIAMI, FL 33166	<b>=</b> Add
			□Remove
MGR	HERNANDO LOPEZ	7105 NW 53RD TERRACE, MIAMI, FL 33166	□Add
			<b>≡</b> Remove
			□ Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□Remove
			□Change
			□Remove
			□ Change
			□Remove
			TChange
		<del>-</del>	□Add
			□Remove
			TiChange

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Note: If the	ate, if other that date is listed, the date date inserted in effective date on	his block does	not meet the	applicable	ate of filing o statutory fi	r more than 90 ling requiren	(optiona days after filin tents, this da	l) ig.) Pursuant to 0 te will not be l	505.0207 listed as
record spe d is filed.	cifies a delayed e	Tective date, bu	it not an effe	ctive time,	at 12:01 a.r	n. on the earl	ier of: (b) 1	The 90th day a	fier the
ated MA	Y 16TH								
			Docusig Us 10 a a						
_		Signature	ora mamber	or authorize	d representat	ive of a memb	 er		