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COVER LETTER

Division of Co	rporations				
SMILE SO	BIG MANAGEMENT, LLC				
SUBJECT:		nited Liability Company			
	Name of Lin	atted Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspond	ondence concerning this matter	to the following:			
	Jonathan Steszewski, Esq.				
		Name of Person			
	Steszewski Law				
		Firm/Company			
	15100 NW 67th Ave., Sui	te 204			
		Address			
	Miami Lakes, FL 33014				
		City/State and Zip Code			
	Jonathan@steszewskilaw.c				
	E-mail address: (to be used for future annual report ix	tification)		
For further information of	concerning this matter, please o	all:			
Jenisc Zuluaga		305 631-2438			
Name o	of Person	at () Area Code Daytii	me Telephone Number		
England is a shape for t	ha fallandar arranga				
Enclosed is a check for the	_				
□ \$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 Addres		Street Address:			
Registration :			Registration Section		
□ \$25.00 Filing Fee Mailing Address	S30.00 Filing Fee & Certificate of Status SE: Section Corporations	(additional copy is enclosed) Street Address: Registration Solution of Co	Certified Copy (additional copy is enclos ection proporations		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SMILE SO BIG MANAGEMENT, 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 1	iability Company were filed on	10/17/2023	and assigned	
Florida document number L23000469333	·			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability company	here:		
The new name must be distinguishable and contain the	words "Limited Liability Company," to	ne designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<u></u>			
B. If amending the registered agent and/or agent and/or the new registered office addresses		r records, <u>enter t</u>	he name of the new registered	
agent and/or the new registered office additi	SS BEIC.			
Name of New Registered Agent:	Jonathan Steszewski, Esq.	·	· 	
New Registered Office Address:	15100 NW 67 Ave., Suite 204			
	Enter Florida street address			
	Miami Lakes	, Flo	rida 33014	
	City	, , , , , , , , , , , , , , , , , , , ,	Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as register.	ed agent and agree to act in th	is canacity. I for	ther garee to comply with the	

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

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
			□Add
			🗆 Remove
			□Change
			DAdd
			□Remove
			□Remove
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		<u></u>	
			DAdd
			Remove
			Change

	<u></u>			
				
				
				
-				
		<u> </u>		
			-	
				
ective date, if other than the neffective date is listed, the date muster. If the date inserted in this blooment's effective date on the December 2.	ock does not meet the app	olicable statutory fili	(option more than 90 days after fi ng requirements, this o	nal) ling.) Pursuant to 605.020 date will not be listed a
ecord specifies a delayed effective s filed.	e date, but not an effectiv	e time, at 12:01 a.m	on the earlier of: (b)	The 90th day after the
ed October 28	, 2024	·		
	A 1			
Brand	on Mappy Signature of a member or a			

Filing Fee: \$25.00