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COVER LETTER

TO: Registration S Division of Co			
Smith & P	erry Holding LLC		
SUBJECT:	Name of Lin	nited Liability Company	_
The enclosed Articles of	Amendment and fee(s) are sub	bmitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Daniel Perry		
		Name of Person	
		Firm/Company	
	96026 Woodmere Way		
		Address	PARES IN TABLE
	Fernandina Beach		
	bts4242@gmail.com	City/State and Zip Code	
		(to be used for future annual report notification)	— ် ့ တို့ ကို တို့
	concerning this matter, please c		
Daniel Perry	of Person	404 881-0420at ()	wher
(Value)		Thea code Baytime retephone was	noci
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	0 Filing Fee, ficate of Status & fied Copy ional copy is enclosed)
Mailing Address Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit Tallahassee, FL 32303	te 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Smith & Perry Holding LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our record nited Liability Company)	<u>(ş.</u>)
The Articles of Organization for this Limited Liability Complorida document number <u>L23000537432</u> .	pany were filed on Dec 4, 2023	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	l liability company here:	
ne new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	<u> </u>	rm rm
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		• •
Same and Maria Services 1900		1.1
. If amending the registered agent and/or registered of gent and/or the new registered office address here: Name of New Registered Agent:	fice address on our records, <u>enter</u>	the name of the new regis
Nam Basistanad Office A 11		
New Registered Office Address:	Enter Florida street address	y
	, Flo	orida
	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

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 donere way	Type of Action
ANBR	Bryan Todd Snith	Address 96026 woodmere Way Jernandina Baach 71 32034	Add By
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ective date, if other than effective date is listed, the date e: If the date inserted in thi ument's effective date on the	e must be specific and cannot be is block does not meet the a	pplicable statutory fil		filing.) Pur	
i filed.	ective date, but not an effect	tive time, at 12:01 a.m	on the earlier of: (b)	The 90	th day after th
ed December 13 February	vy 8, 20) 4 2023	· ·			
	Story	2		 	
	Signature of a member or	outhorized compact this	ua afa mambar		