

L23000 554/159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

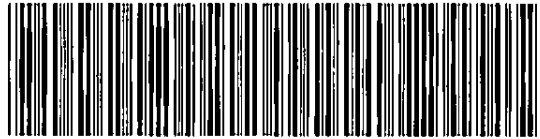
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FL
30

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Smart Spaces and Surveillance Systems LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Saleem Douglas
Name of Person

Smart Spaces and Surveillance Systems LLC
Firm/Company

7801 Colony S Apt 109
Address

Fort Lauderdale, FL 33321 US
City/State and Zip Code

smartspacesja@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Saleem Douglas at (876) 878-6605
Name of Person Area Code Daytime Telephone Number

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Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|--|--|

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Smart Spaces and Surveillance Systems
(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 Dec 19 2023 and assigned Florida document number L23000557199

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Smart Spaces and Surveillance Systems Solutions LLC
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: N/A (SAME)
(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

7801 Colony Circle S Apt 109
Fort Lauderdale
FL 33321 USA

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:

N/A
Name of New Registered Agent: (SAME) Saleen Douglas

New Registered Office Address: 7801 Colony Circle S Apt 109
Enter Florida street address
Fort Lauderdale, Florida 33321 USA
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.

N/A

SAME

If Changing Registered Agent, Signature of New Registered Agent.

FILED
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TALLAHASSEE, FL
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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>
AP	Raymond Sennyuen	3128 Sw 129 th Ter	<input type="checkbox"/> Add
		MIRAK FL 3321 JS	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	Sheldon Satchell	7801 Colony Circle Apt 109	<input type="checkbox"/> Add
		FL 33321 JS	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Saleem Douglas	- NEW address	<input type="checkbox"/> Add
		7801 Colony Circle S	<input type="checkbox"/> Remove
		Apt 109 FL 33321 JS	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FL

CLARK COUNTY
LIBRARY OF STATE
TALLAHASSEE, FL
2020.01.19 PM 5:41

2021 JUL 19 PM 5:41
CLERK OF STATE
TALLAHASSEE, FL

(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)

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.

921 1st 2024

Salem Douglas

Typed or printed name of signee