

L24000013663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

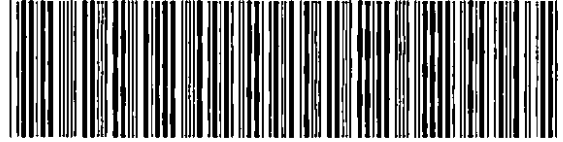
(Document Number)

Certified Copies _____ Certificates of Status _____

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Amended

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SECRETARY OF STATE
TALLAHASSEE, FL

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[Handwritten signature]

COVER LETTER

O: Registration Section
Division of Corporations

SMART2MARKET, LLC
SUBJECT: _____

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:

Mark Guthrie

Name of Person

Smart2Market

Firm/Company

690 Main Street

Address

Safety Harbor, FL 34695

City/State and Zip Code

markg@smart2market.com

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Mark Guthrie

480

242-5104

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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 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**

SMART2MARKET, 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 01/04/2024 and assigned
Florida document number L24000013663.

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:

(Principal office address MUST BE A STREET ADDRESS)

3351 Banyon Hollow Loop

FL 33903

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

690 Main Street

Ste. 22470

Safety Harbor, FL 34695

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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:

3351 Banyon Hollow Loop

Enter Florida street address

North Ft Meyers,

Florida 33903

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

Amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

IGR = Manager
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|--------------------------------|--|--|
| MGR | GUTHRIE, MARK | 501 5TH AVE. NE, ATTN: M.GUTHRIE, SLIP B08 | <input type="checkbox"/> Add |
| | | ST PETERSBURG, FL 33701 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | SCHILLING-GOSSARD, KATHR | 3807 ENSENADA CT | <input type="checkbox"/> Add |
| | | FORT COLLINS, CO 80526 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Biz360, LLC | 690 Main Street | <input checked="" type="checkbox"/> Remove |
| | | Ste. 22470 | <input type="checkbox"/> Remove |
| | | Safety Harbor, FL 34695 | <input type="checkbox"/> Change |
| MGR | Frontier Business Systems, LLC | 3807 ENSENADA CT | <input checked="" type="checkbox"/> Add |
| | | FORT COLLINS, CO 80526 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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TALLAHASSEE, FL

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.

Dated 08 November 2024


Signature of a member

Signature of a member or authorized representative of a member

Mark A. Guthrie

Typed or printed name of signer

Filing Fee: \$25.00