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BALLAHASSEE, FLORIDA

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JUN 25

COVER LETTER

то:	Registration Section Division of Corporations					
	Division of Corporations					
SUBJ	ECT: SMART ECO LLC					
	Nai	ne of Limited l	Liability Company			
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Of	fice Change an	d fee(s) are submitted for filing.			
Please	return all correspondence concerning the	nis matter to the	e following:			
Aldo F	abian Sanchez Lias					
	Name of Person					
SMAR	T ECO LLC					
	Firm/Company					
12618	Splendid Pl Apt3418					
	Address					
Orland	lo, Fl. 32821					
	City/State and Zip Code					
fsanch	ez@smartecousa.com					
	E-mail address: (to be used for future an	nual report not	tication)			
For fu	rther information concerning this matter	, please call:				
Aldo Fa	abian Sanchez Lias	aı (<u></u>	280 8377			
	Name of Person		Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	R D P	IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314			
Enclosed is a check for the following amount:						
	2 S25 Filing Fee		S55 Filing Fee & Certified Copy			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. 1	Na	me of the limited liability company:						_
2. (a)	12618 Splendid Place	C	b)				
(,	,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Apt 3418						
		Orlando, FL 32821	- -					
		01/09/2025		L250000186	570			
3.		Date of filing/registration in Florida	4.		Document number			
5. (a	a Y	SANCHEZ LIAS, ALDO F						
J. (6	,	Registered Agent and Registered Office shown on the records of t	he Florid	a Dept. of Sta	- te:			
		12618 SPLENDID PLACE 3418						
		Registered Office Address (MUST BE FLORIDA STREET A	DDRES.	<u>S)</u>	_			
						要	N	
		ORLANDO FL	32821		_	SECKE	2025 APR 30	
(b)	Registered Agents Inc				TARY ASSE	ж 30	<u></u>
(0)	,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		_	<u>in</u> ⊆	PH		
		7901 4th St N			STATE	1 5: 25		
		NEW Registered Office Address:				₹	S	
		STE 300			_			
		St. Petersburg . FL	33702	_				
the cl agent was/v	hai Ew we	mited liability company is not organized under the law nge or changes are made, the Florida street address of rill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the organization of the	the regi bility c f the lin limited	istered offic ompany, it i nited liabilit	e and the business of is hereby confirmed f ty company or as oth upany.	ffice of that the	the reg	gistered (c(s)
Sign	nat	ure of a member or authorized representative of a member		•	Printed or typed name	of signee	_	
provi the o to me notifi	sie bli re	ny accept the appointment as registered agent and agro ions of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I h I'in writing of this change. David Roberts - Assistant So	perform for in ereby c	t in this cap nance of my Chapter 60, confirm that	pacity. I further agreed duties, and I am fam 5, F.S. Or, if this doc the limited liability (e to con uliar wi cument compan	nply w th and is bein y has	ith the l accept ig filed heen
$\underline{}$		David Roberts - Assistant Se	cretary					