

Division of Corporations

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1160000167252Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : GREENBERG TRAUBIG (ORLANDO)
Account Number : 103731001374
Phone : (407) 418-2435
Fax Number : (407) 420-5909

2018 JUN -1 A 5:03

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ANettle@smartfinancialent.comLLC REGISTERED AGENT CHANGE
SMART FINANCIAL OPERATIONS, LLC

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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. Name of the limited liability company: SMART Financial Operations, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
5728 Major Blvd., Suite 100
Orlando, FL 32819

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
5728 Major Blvd., Suite 100
Orlando, FL 32819

3. 11/04/2016 Date of filing/registration in Florida

4. M16000008886 Document number

5. (a) Jeff Wheatley
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
5728 Major Blvd., Suite 100
Orlando, FL 32819

(b) Austin Nettle
Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Office Address
5728 Major Blvd., Suite 100
Orlando, FL 32819

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Austin Nettle
Signature of a member or authorized representative of a member

Austin Nettle, CFO
Printed or typed name of signer

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.

Austin Nettle
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

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