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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone : (855)330-1010 Fax Number

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1188 SNOWDEN LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1188 Snowden LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L18000224065	were filed on 09/20/18	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the al	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
B. If amending the registered agent and/or registered office a	address on our records, enter the nan	ne of the new registered
agent and/or the new registered office address here:		~ ~
Name of New Registered Agent:		022
New Registered Office Address:		AY _ 3
New Registered Office Addicess.	Enter Florida street address	3
	, Florida	A 00 V
New Registered Agent's Signature, if changing Registered Agent:	City	- sup Cude
Thereby accept the appointment as registered agent and agr		reas to comple 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 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

Title	Name	Address	Type of Action
MGR	MATTHEW OHLROGGE	7901 4th St N STE 300	□Add
		St. Petersburg, FL 33702	Remove
			X Change
AMBR	DANIELLE OHLROGGE	7901 4th St N STE 300	□Add
		St. Petersburg, FL 33702	□Remove
			X)Change
AMBR	ANDREW OHLROGGE	7901 4th St N STE 300	∑]∧dd
		St. Petersburg, FL 33702	□Remove
			□Change
			[] Add
			□Remove
		•	□Change
			□Add
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			□Change

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Effective date, if other than (If an effective date is listed, the dat Note: If the date inserted in the document's effective date on the second seco	his block does no	it meet the applica	able statutory fil	more than 90 days ing requirements	optional) after filing.) Pursuan s, this date will not	t to 605.0207 { be listed as t
ne record specifies a delayed efford is filed.	fective date, but	not an effective ti	me, at 12:01 a.n	i. on the earlier o	of: (b) The 90th da	ny after the
Dated 05/13		2022	·			
Mom	Jan C	a member or autho	orized representati	ve of a member		
	- 3090600CO		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	or a member		
Morgan N	•		,			

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