204000047621

• ((Requestor's Name)	
((Address)	
	(Address)	·-···
	City/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL.
	Business Entity Nam	e)
	(Document Number)	
Certified Copies	Certificates	of Status
Special Instructions	to Filing Officer:	
	A. LUN	IT
	NOV 9 0. 2010	,

EXAMINER

Office Use Only



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10/18/12--01009--006 **25.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

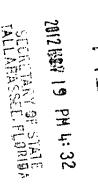


October 19, 2012

REINHARD SCHNEIDER 310 W HALLANDALE BEACH BLVD. HALLANDALE BEACH, FL 33009

SUBJECT: SCHNEIDER AND SONS, LLC

Ref. Number: L04000047621



We have received your document for SCHNEIDER AND SONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 912A00025857

COVER LETTER

то:	Registration S Division of Co				
SUBJE	SUBJECT: Schneider and Sons, LLC				
SOBGE			ted Liability Company	_	
The end	closed Articles of	f Amendment and fee(s) are sub	mitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
		Reinhard Schneider			
			Name of Person		
		S	chneider & Sons, LLC		
			Firm/Company		
	310 W Hallandale Beach, Blvd				
			Address	771	
		Halla	andale Beach, FL 33009	ZHZ KBY 19	
			City/State and Zip Code	7 I.G	
		rei	nhards84@yahoo.com to be used for future annual report notification)	Property Control of the Control of t	
For fur	ther information	concerning this matter, please c		PH 4: 32 OF SIATE OF LORIBA	
	Rein	hard Schneider	at (954) 618-6606	2 0	
-		of Person	Area Code & Daytime Telephone Nur	nber	
Enclos	ed is a check for	the following amount:			
√ \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	Filing Fee, ficate of Status & fied Copy tional copy is enclosed)	
			r		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section ion of Corporations 30x 6327	STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Schneider and Sons, LLC)	
(Name of the L	Limited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Lin	nited Liability Company were filed on	09-21-12	and assigned
Florida document number L040	00047621		
This amendment is submitted to amend t	the following:		
A. If amending name, enter the new n	name of the limited liability company h	ere:	
The new name must be distinguishable and "L.L.C."	end with the words "Limited Liability Com	pany," the designation	
Enter new principal offices address, if	applicable:		2012 W
(Principal office address MUST BE A S	STREET ADDRESS)		\$ 5 6 7
Enter new mailing address, if applical	ble:		DF STA
(Mailing address MAY BE A POST OF	•		32 P
B. If amending the registered agen registered agent and/or the new regist	at and/or registered office address on ered office address here:	our records, ente	r the name of the new
Name of New Registered Ager	nt:		
New Registered Office Addres		Enter Florida street d	address
		, Florida	
	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 608, 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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Daniel J. Acosta	13 Rich Lane Cortland Manor, NY 10567	Add Remove
MGR	Franz Schneider	101 Red Ribbon Rd Westport, TN 38387	✓ Add ☐ Remove
			Add Remove
			Add Add Remove
			AHASSA Remove
D. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if necess	Remove
Dated			
	_	nember or authorized representative of a member	
	<u></u>	Reinhard Schneider - MGR Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00