

LO7000105671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

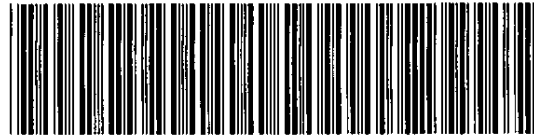
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900156560299

07/27/09--01061--003 **25.00

FILED
2009 JUL 24 PM 1:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
JUL 27 2009
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Snell Isle Investments, LLC
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:

Christopher C. Sanders, Esq.

Name of Person

Sanders Law Group, PA

Firm/Company

2958 1st Avenue N.

Address

St. Petersburg, FL 33713

City/State and Zip Code

patmanjo@aol.com

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

For further information concerning this matter, please call:

Christopher C. Sanders, Esq.

Name of Person

at (727)

328-7755

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 16, 2009

CHRISTOPHER C. SANDERS, ESQ.
SANDERS LAW GROUP, PA
2958 1ST AVE N.
ST. PETERSBURG, FL 33713

SUBJECT: SNELL ISLE INVESTMENTS, LLC
Ref. Number: L07000105671

We have received your document for SNELL ISLE INVESTMENTS, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 309A00024454

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
2009 JUL 24 PM 1:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Snell Isle Investments, 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 October 17, 2007 and assigned Florida document number L07000105671.

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 end with 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)

1455 Oceanview Dr.

Tierra Verde, Florida 33715

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1455 Oceanview Dr.

Tierra Verde, Florida 33715

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:

Enter Florida street 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>	<u>Address</u>	<u>Type of Action</u>
MGRM	Michael O. Mitchell	960 Bayview Place NE St. Petersburg, Florida 33704	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Patrick Walsh	1455 Oceanview Dr. Tierra Verde, Florida 33715	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated July 13, 2009

Signature of a member or authorized representative of a member

Christopher C. Sanders, Esq., Authorized Representative

Typed or printed name of signee

FILED
 2009 JUL 24 PM 1:36
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA