L080000000587

(Re	equestor's Name)	_	
(Ac	ldress)		
(Ac	ldress)		
(Ci	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bi	usiness Entity Nai	me)	
(Do	ocument Number		
Certified Copies Certificates of Status			
		`	
Special Instructions to	Filing Officer:		
<u> </u>			





600123026536

04/14/08--01025--001 **30.00

08 APR 14 PH 3: 08
SECRETARY OF STATE
TALL AHASSEF, FLORID

D. BRUCE

APR 1 4 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	Snaw Famou	ed Liability Company)	LLC		
The enclosed Articles o	f Amendment and fee(s) are subm	nitted for filing.			
Please return all corresp	oondence concerning this matter to	o the following:			
	Jessi Snap Fav	(Name of Person) MOUS Production (Firm/Company)	ns, LLC		
	2819 SW 181 Miramar, Fi	(Address) 33099 (City/State and Zip Code)	ALLAHADSGE, F	SECRETARY OF	
Jessica,	concerning this matter, please cal	II: at (<u>95⁴) LOLO 71</u> (Area Code & Daytime T	Celephone Number)	3: 1 8	
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fe Certificate of S Certified Copy (additional cop	Status &	ed)
DA A Y	LING ADDRESS.	CTREET/COUDIER	ADDRESS.		•

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Snap Fa (Name of the Limited Liab) (A Flori	MOUS Product ility Company as it now appears of da Limited Liability Company)	TOMS (1		٠
The Articles of Organization for this Limited Liabilit			<u>006</u> and assi	gned
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the l	limited liability company here:			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	," the designation	"LLC" or the al	obreviation
B. If amending the registered agent and/or registered agent and/or the new registered office a	gistered office address on oui	r records, <u>enter</u>	the name of	the new
			TALLAP SEGRI	
Name of New Registered Agent:			HAS A	
New Registered Office Address:	(Ente	r Florida street a	S = F	
		, Florida _	STAT	
	(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 Title ' Name <u>Address</u> Type of Action Alfred L. Finesse Mitchell Add Remove ☐ Add Add Remove Add Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated March 25 Senature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00