L08000025761

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, (Ad	ldress)	
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CIVISION OF CORPORATIONS

J. BRYAN

JUN 1 3 2008

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE		
	(Name of Limited Liability Company)	
The en	closed Articles of Amendment and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	James Rivera (Name of Person)	
	(Name of Person)	
	SNJ Distributors LLC (Firm/Company)	
	(Camb company)	
	2/241 SW 94 AVE (Address)	0 27
	(Address)	STOR
	Cutter Bay FL (City/State and Zip Code)	H OF SH
	(City/State and Zip Code)	- CORPOR
For fur	her information concerning this matter, please call:	OB JUN 11 PH 2: 18
	(Name of Person) at (305) 776-6484 (Area Code & Daytime Telephone Number)	₩ ₹
Epclose	d is a check for the following amount:	
\$25	00 Filing Fee \$\square\$\$\$30.00 Filing Fee & Certificate of Status \$\square\$\$ Certified Copy (additional copy is enclosed) \$\square\$\$\$ Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

4.1

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



SNJ Distributors	L.L.C
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 08000025761</u> .	were filed on March U, 2008 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and end with the words "Limit	
The new name must be distinguishable and end with the words "Limit "L.L.C."	
Enter new principal offices address, if applicable:	<u>Idalia Mercadal</u> 5200 SW 158 AVE
(Principal office address MUST BE A STREET ADDRESS)	5200 SW 158 AVE
	Miami, FL 33185
Enter new mailing address, if applicable:	5200 SW 158 ave
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FC 33185
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	Idalia Mercadal
New Registered Office Address: 56	200 SW 158 Ave
	(Enter Florida street address)
Mian	
	(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)

MGR = Ma MGRM = M	, inager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Sergio Pinon	5200 SW 158 AVE Miami, FC 33189	Add Remove
<u>MbR</u>	Jose Reyes	18855 SW 264 St Homestead, FL 33031	Add Remove
<u>MGR</u>	Idalia Mercadal	5200 SW 158 Ave Miami, PL 33189	Add Remove
MbR	Rase mary Pena	21954 SW 125 AVE Miami, FL 33170	Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	
			SECRETARY OF STATE SECRETARY OF STATE ONS DIVISION OF CORPORATIONS
Dated	() (0	<u></u> •	-
	Serain Dinan	r or authorized representative of a member I or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00