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UNITED STATES
FBI - BOSTON - LONDON

D. BRUCE
FEB 11 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2019

PAUL VOGEL
270 MEADOW LAKE DR
FREEPORT, FL 32439

SUBJECT: SNAP ENTERPRISE TECHNOLOGY SOLUTIONS LLC
Ref. Number: L08000064873

We have received your document for SNAP ENTERPRISE TECHNOLOGY SOLUTIONS LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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) 245-6051.

Deborah Bruce
Corporate Records Supervisor

Letter Number: 119A00002123

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COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: SNAP ENTERPRISE TECHNOLOGY SOLUTIONS 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:

Paul Vogel

Name of Person

SNAP ENTERPRISE TECHNOLOGY SOLUTIONS LLC

Firm/Company

270 MEADOW LAKE DR

Address

FREEPORT, FL 32439

City/State and Zip Code

mike@pwelife.com

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

For further information concerning this matter, please call:

Paul Vogel

at (904) 476-3191

Name of Person

Area Code

Daytime Telephone Number

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 Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

*It has been paid & cashed
- sending Document with
corrected distinguishable name*

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

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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08-14-2019 BY 60322 UCBAW

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

SNAP ENTERPRISE TECHNOLOGY SOLUTIONS 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 July 3, 2008 and assigned
Florida document number 1.08000064873.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

~~The Vogel Group LLC~~ The Vogel Group 30A LLC.

The new name must be distinguishable and contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

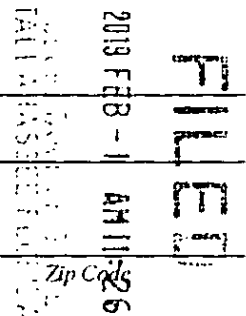
Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City



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 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 Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Sarah Vogel	270 Meadow Lake Dr. Freeport	<input checked="" type="checkbox"/> Add
		Freeport, FL 32439	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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CLERK OF DISTRICT COURT
DADE COUNTY FLORIDA

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated January 17 2019

Signature of a member

Signature of a member or authorized representative of a member

Paul M Vogel

Typed or printed name of signee

Filing Fee: \$25.00

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