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SECRETARY OF STATE

J. SAULSBERRY EXAMINER. MAR 5 2013

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Snyder and Hodge, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Neil E. Snyder Name of Person Snyder and Hodge, LLC Firm/Company Address Marco Island, FL 34145 City/State and Zip Code

nsnyder@hodgeandsnyder.com

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

For further information concerning this matter, please call:

Neil E. Snyder	_{at (} 239) 430-0001
Name of Person	Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■\$125.00 Filing Fee □\$130.00 Filing Fe

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$160.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company	is:
Snyder and Hodge, LLC	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
654 Bald Eagle Drive	654 Bald Eagle Drive
Marco Island, FL 34145	Marco Island, FL 34145
The name and the Florida street address of the Neil E. Snyder Na	ne registered agent are:
654 Bald Eagle Drive	To 🕏 M
Marco Island,	address (P.O. Box NOT acceptable)
City,	, State, and Zip
liability company at the place designated registered agent and agree to act in this cap all statutes relating to the proper and comp	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of plete performance of my duties, and I am familiar with a registered agent as provided for in Chapter 608, F.S

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Ma "MGRM" = N	nager Managing Member	Name and Address:	
MGRM		Neil E. Snyder	
		654 Bald Eagle Drive	
		Marco Island, FL 34145	
MGRM		Rebecca Hodge Snyder	Ā ₂
	<u></u>	654 Bald Eagle Drive	DE:
		Marco Island, FL 34145	3.77
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LE V: Effecti ffective date or 90 days af REQUIRED	ive date, if other than is listed, the date mater the date of filing.  SIGNATURE:  Signature of a men accordance with section on the stitutes an affirmation under a ware that any false information and a ware that any false information.	nber or an authorized representative of a 608.408(3), Florida Statutes, the execution der the penalties of perjury that the facts statement on submitted in a document to the December 2015.	re than five busine member.  of this document ated herein are true.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)