## 13000033692

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JUN 25 2013 J. BRYAN

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

Snyder and Hodge, 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:

Neil E. Snyder, Esquire

Name of Person

Snyder and Hodge, LLC

Firm/Company

651 South Collier Blvd., Suite 2H

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

,,,239,**430-**000*1* 

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)

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

TALLED AND STATES OF STATE

Snyder and Hodge, 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 Li	ability Company	were filed on March 4,	2013 and assigned	
Florida document number L13000033692				
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ited Liability Company," the	designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		651 South Collier Blvd., Suite 2H		
(Principal office address MUST BE A STREET ADDRESS)		Marco Island, FL 3	4145	
Enter new mailing address, if applicable:		651 South Collier E	Blvd., Suite 2H	
(Mailing address MAY BE A POST OFFICE BOX)		Marco Island, FL 3	4145	
B. If amending the registered agent and/or the new registered of Name of New Registered Agent:	fice address her			
New Registered Office Address:	Enter Florida street address			
	Marco Islar	nd	, Florida <u>34145</u>	
		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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member							
<u>Title</u>	<u>Name</u>	Address	Type of Action				
			Add				
			TA SECRE				
			CREET PORT				
			SEE FAND				
			Add				
		-	Remove Remove				
			Add				
			Remove				
			Remove				
			Add				
			Remove				
			Add				
			Remove				

D. If amend	ling any other info	rmation, enter change(s) here: (Attach additional sheet	s, if necessary.)	
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Dated Jun	e 18	2013	TASE S	<u></u>
		$\ell\Lambda$	CRET	JUH 24
	Neil E. Snyo	·	mber Sign	2 0
		Typed or printed name of signee  Page 3 of 3	FLUK	S. 16
		Filing Fee: \$25.00	<b>(</b>	ス