

U3000157445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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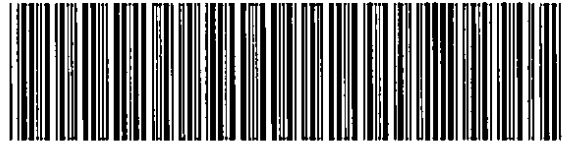
(Business Entity Name)

(Document Number)

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FIELD
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 SEP -4 PM 3:52

N COOPER

SEP 07 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ANT SNB 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:

JUAN A. AZPURUA

Name of Person

ANT SNB LLC

Firm/Company

2020 W MCNAB ROAD SUITE 112

Address

FORT LAUDERDALE, FL 33309

City/State and Zip Code

jazpurua1967@gmail.com

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

For further information concerning this matter, please call:

Juan A. Azpurua

561 843-2037
at ()

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

ACAV
ACAV

TO
ARTICLES OF ORGANIZATION
OF

ANT SNB 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 11/08/2013 and assigned
Florida document number L13000157445

This amendment is submitted to amend the following:

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

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)

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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 Zip Code

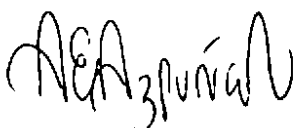
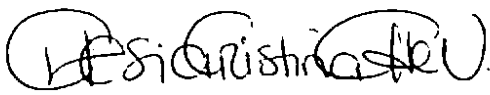
New Registered Agent's Signature, if changing Registered Agent:

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 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.

ACW *ACW*

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	AZPURUA DE GONZALEZ, ANA E	2020 W MCNAB ROAD SUITE 112	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Remove
		Change title to <i>MGR</i>	<input checked="" type="checkbox"/> Change
MGRM	AZPURUA DE VOLLMER, ALEXIA C	2020 W MCNAB ROAD SUITE 112	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Remove
		Change title to <i>MGR</i>	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

The only information to be amended is the titles of the current DIRECTORS, to wit:

ANA E. AZPURUA DE GONZALEZ and ALESIA C. AZPURUA DE VOLLMER

to MGR.

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E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

(b) The 90th day after the record is filed.

Dated August 31, 2018.

[Signature] ANA AZPÚRUA
Signature of a member or authorized representative of a member

Alesia Cristina Azpúrua ANA EUSW AZPÚRUA
Typed or printed name of signee