

L13000168561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

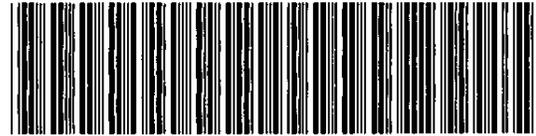
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

DEC 12 2013

7:10:57

Office Use Only



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12/12/13--01001--008 **25.00

RECEIVED
DEPARTMENT OF STATE
OFFICE OF REGISTRATION
2013 DEC 11 PM 4:22
FILING OFFICE
TALLAHASSEE, FLORIDA
10 ALL INFORMATION
SUFFICIENT FOR FILING

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SNL LL, LLC

L13000168561

Signature _____

Requested by: BA 12/11 pm
Name Date Time

Walk-In _____ Will Pick Up _____

- _____ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

2012 DEC 11 AM 10:42
RECEIVED
TALLAHASSEE COUNTY
CLERK OF CIRCUIT COURT

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SNL LL LLC

Name of Limited Liability Company

FILED
2013 DEC 11 14 19 42
TALLAHASSEE, FL 32301

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

Please return all correspondence concerning this matter to the following:

SHAY SHPONDER

Name of Person

SNL INVESTMENTS GROUP LLC

Firm/Company

1111 PARK CENTRE BLVD #450

Address

MIAMI GARDENS FL 33169

City/State and Zip Code

SHAYSHPONDER@GMAIL.COM

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

For further information concerning this matter, please call:

SHAY SHPONDER

Name of Person

at (**305**) **606-6800**

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

FILED
2013 DEC 11 AM 10:42
MARIETTA, GA

SNL LL 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 DECEMBER 5TH 2013 and assigned Florida document number L13000168561.

This amendment is submitted to amend the following:

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

NO CHANGE

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1111 PARK CENTER BLVD #450

(Principal office address MUST BE A STREET ADDRESS)

MIAMI GARDENS FL 331698

Enter new mailing address, if applicable:

1111 PARK CENTRE BLVD # 450

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI GARDENS FL 33169

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:

NO CHANGE

New Registered Office Address:

NO CHANGE

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 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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

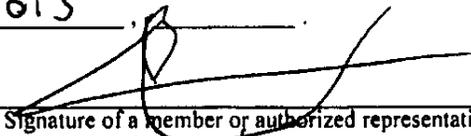
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	MAY BEDOLACH	1111 PARK CENTRE BLVD #450	<input checked="" type="checkbox"/> Add
		MIAMI GARDENS FL 33169	<input type="checkbox"/> Remove
MGR	LIRON BEN SHIMON		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2013 JUN 1 4 42 PM
 MIAMI GARDENS FL 33169
 MAY BEDOLACH

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 12-10-2013


Signature of a member or authorized representative of a member

SHAY SPENDER
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 DEC 11 AM 10:42

FILED