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Special Instructions to	Filing Officer	
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Office Use Only



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B. BOSTICK
JUN **2 4** 2014

EYRMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	ECT: SNO Investments LLC Name of L	imited Liability Company	
The en	closed Articles of Organization and fee(s)	are submitted for filing.	
Please	return all correspondence concerning this i	matter to the following:	
	Kris R Vassallo	Name of Person	
		Name of Person	
		Firm/Company	
	PO Box 5836	Address	
		Address	
	Sarasota, FL 34277	City/State and Zip Code	
	snoinvestments E-mail address: (to be us	@yahoo.com ed for future annual report notifica	tion)
For fur	ther information concerning this matter, ple		: : : : : : : : : : : : : : : : : : :
Kris R	Vassallo at (941) 962-1088 Area Code Daytime Tel	ephone Number
		Area Code Daytine Tel	ephone Number
Enclose	ed is a check for the following amount:		•
区 \$12 5.0	0 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 Addr Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
SNO Investments LLC	
	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal of	fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6601 Taeda Drive Sarasota, FL 34241	PO Box 5836 Sarasota, FL 34277
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own I another business entity with an active Florida registration.) The name and the Florida street address of the registered with the Registered of the Regist	Registered Agent. You must designate an individual or a.)
Name	
6601 Taeda Dr	
Florida street address (P.O. Box	NOT acceptable)
Sarasota	<u>FL 34241</u> Zip
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions o of my duties, and I am familiar with and accept the obli	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performance igations of my position as registered agent as provided for in epolis, F.S.
(CONTINUI	ED)

Page 1 of 2

Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Kris R Vassallo Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	Title:		Name and Address:	
AMBR Kris R Vassallo 6601 Taeda Dr Sarasota, FL 34241 Tina Arcarese 6601 Taeda Dr Sarasota, FL 34241 (Use attachment if necessary) E V: Effective date, if other than the date of filing: (OPTIONAL) E V: Effective date, if other than the date of filing: (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Kris R Vassallo Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$3.0.00 Certificate of Status (Optional)				
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Sarasota, FL 34241 (Use attachment if necessary) E. V: Effective date, if other than the date of filing: (OPTIONAL) retive date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) E. VI: Other provisions, if any. Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Kris R Vassallo Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certificate of Status (Optional)	7 1111221 1		6601 Taeda Dr	
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