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TALLAHASSEE, FLORIDA

DEC 21 2015

S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SNJ PROPERTY INNOVATORS, 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:

SUSAN E. RODRIGUEZ

Name of Person

SNJ PROPERTY INNOVATORS LLC

Firm/Company

10040 SW 80 TERRACE

Address

MIAMI, FL. 33173

City/State and Zip Code

realtysun@bellsouth.net

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

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

SUSAN E. RODRIGUEZ

Name of Person

305 807 5405

at ()

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

SNJ PROPERTY INNOVATORS, LLC.

Page 1 of 3

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	JESUS RODRIGUEZ	17384 NW 76 COURT	<input checked="" type="checkbox"/> Add
		MIAMI, FL. 33015-6166	<input type="checkbox"/> Remove
AMBR	CAROLYN MARTINEZ	12355 SW 90 STREET	<input type="checkbox"/> Add
		MIAMI, FL. 33176	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
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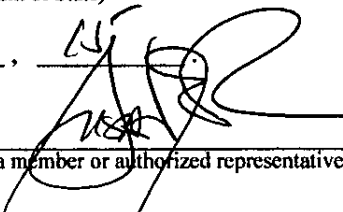
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: 11/17/2015 **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

Nov 17



Signature of a member or authorized representative of a member

SUSAN E. RODRIGUEZ

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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

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

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Dated Nov 17, 2015



Signature of a member or authorized representative of a member

JESUS RODRIGUEZ

Typed or printed name of signee

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