

L15 000061765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

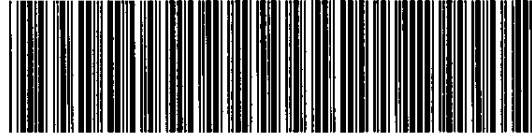
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SNACKR, LLC**

**SUBJECT:** \_\_\_\_\_  
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:

**Jeffrey A Kaminski**

\_\_\_\_\_  
Name of Person

**SNACKR, LLC**

\_\_\_\_\_  
Firm/Company

**1921 SW 33rd Ct.**

\_\_\_\_\_  
Address

**Miami, FL 33145**

\_\_\_\_\_  
City/State and Zip Code

**jeff@snackrapp.com**

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

For further information concerning this matter, please call:

**Jeffrey A Kaminski**

**609**

**3139990**

\_\_\_\_\_  
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

**SNACKR, LLC**

Page 1 of 3

**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>
MGR	Jeffrey A Kaminski	35 Gateway Blvd	<input type="checkbox"/> Add
		Hillsborough, NJ 08844	<input checked="" type="checkbox"/> Remove
AMBR	Jeffrey A Kaminski	35 Gateway Blvd	<input checked="" type="checkbox"/> Add
		Hillsborough, NJ 08844	<input type="checkbox"/> Remove
AP	Herwig G Konings	1 Hageman Lane	<input type="checkbox"/> Add
		Princeton, NJ 08540	<input checked="" type="checkbox"/> Remove
AMBR	Herwig G Konings	1 Hageman Lane	<input checked="" type="checkbox"/> Add
		Princeton, NJ 08540	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove


SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
APR 8 AM 8:27  
100

EIN# 47-3688000

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (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 April 20th, 2015

  
Signature of a member or authorized representative of a member

Jeffrey A. Kaminski

Typed or printed name of signee

Page 3 of 3  
Filing Fee: \$25.00

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