# L150000 86395

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CECRELARY OF STATE

J. HARRIS

Allison C. Lucy Direct Dial 207-992-4310 alucy@eatonpeabody.com 80 Exchange Street, P.O. Box 1210 Bangor, Maine 04402-1210 Phone 207-947-0111 Fax 207-942-3040 www.eatonpeabody.com

April 25, 2016

### **VIA FEDERAL EXPRESS**

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

RE: Statement of Correction

Dear Sir/Madam:

Please find enclosed a Statement of Correction for Snowdrift LLC. We have also enclosed our check in the amount of \$25 for the required filing fee. Do not hesitate to contact me if you have questions.

Very truly yours,

Allison C. Lucy

ACL/mg

cc: Charles G. Rohn

## **COVER LETTER**

TO: Registration Se Division of Co			
SUBJECT: Snow	vdrift LLC		-
	Ŋ	Name of Limited Liabi	lity Company
Dear Sir or Madam:			
The enclosed Statement	of Correction and fee(s) a	re submitted for filing	,
Please return all corresp	ondence concerning this n	natter to the following	:
David M. A	ustin, Esq.		
	Name of Person		
Eaton Pea	body		
	Firm/Company	<del></del>	
P.O. Box 1	210		
Bangor, MI	Address E 04402-12'	10	
	City/State and Zip Code		
E-mail address: (to	be used for future annual	report notification)	
For further information	concerning this matter, ple	ase call:	
David M. A	ustin	<sub>at (</sub> 207	947-0111  Daytime Telephone Number
Name	of Person	Area Code	Daytime Telephone Number
STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center C Tallahassee, Florida 323	s Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for	the following amount:		
\$25 Filing Fee	S30 Filing Fee & Certificate of Status	\$55 Filing Fee of Certified Copy	& S60 Filing Fee, Certificate of Status & Certified Copy
CR2E062 (9/15)			

#### STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: Snowdrift LLC The Florida Document number of the limited liability company is: <u>L 15000</u>086395 SECOND: Articles of Organization THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT X Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Article IV includes 1 manager, and at the time of the filing there were and are still now 3 managers. Please see attached Exhibit A for the corrected statement. OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR  $\Box$ The electronic transmission of the record was defective. Signature of Authorized Representative Charles G. Rohn, Secretary Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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. Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)

# Exhibit A

t <u>les</u> MBR" = Authorized Member IGR" = Manager	Name and Address:	
MGR	John B. Darling	
	414) Hinel Ave	
	Sarasota, FL, 34242	
MGR	John B. Darling, II	
	20 Daisy Lane	
	Hampden, Maine 04444	
MGR	Charles G. Rohn	
	68 Grandview Drive	
	Westbrook, Maine 04092	

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