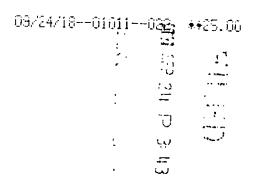
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## **COVER LETTER**

	SNOWCO,	LLC		
SUBJECT: _		Name of Lim	ited Liability Company	<u> </u>
ricase return	an correspo			
			Name of Person	
Please return all correspondence concerning this matter to the following:  ERIC HOWELL, ACCOUNTANT  Name of Person  HOWELL CPA GROUP  Firm/Company  408 W. BALDWIN RD.  Address  PANAMA CITY, FL 32405  City/State and Zip Code  ADMIN@HOWELLCPAGROUP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  ERIC HOWELL  850 215-3093				
	Division of Corporations  SNOWCO, LLC  Name of Limited Liability Company  enclosed Articles of Amendment and feets) are submitted for filing.  se return all correspondence concerning this matter to the following:  ERIC HOWELL, ACCOUNTANT  Name of Person  HOWELL CPA GROUP  Firm/Company  408 W. BALDWIN RD.  Address  PANAMA CITY, FL 32405  City/State and Zip Code  ADMIN@HOWELLCPAGROUP.COM  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:  IC HOWELL  Name of Person  Area Code  Daytime Telephone Number  Losed is a check for the following amount:  \$25.00 Filing Fee  S25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  MAILING ADDRESS: Registration Section Division of Corporations  STREET/COURIER ADDRESS: Registration Section Division of Corporations			
		408 W. BALDWIN RD.		 .: 22
			Address	: <del>-</del> T
		PANAMA CITY, FL 3240	95	بين <sub>ـ</sub>
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For further int	formation c		•	notification)
ERIC HOWE	ELL			3
·	Name o	f Person	Area Code Da	ytime Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25,00 Fi	ling Fee		Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio	ration Section on of Corporations	Registration Se	ection orporations

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SNOWCO, LLC		
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our recor a Limited Liability Company)	<u>'ds.</u> )
The Articles of Organization for this Limited Liability Colorida document number L16000010513	Company were filed on 1/14/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	iited liability company here:	
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LI.	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDI	RESS)	
-		. 2
		. J.
Enter new mailing address, if applicable:		المسلمة ليبا
Mailing address MAY BE A POST OFFICE BOX)		<i>=</i>
	-	
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered office add</li> </ol>		ds, enter the name of the
Name of New Registered Agent:		<del></del>
New Registered Office Address:	Enter Florida street addr	ess
		lorida Zip Code
	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 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	ROGERS, RONNIE W	PO BOX 27359	
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		PANAMA CITY, FL 32411	■ Remove
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Tective date, if other than the date of filing:		(optional)	<b>407</b>	
an effective date is listed, the date must be specific and cannot be prio ote: It'the date inserted in this block does not meet the appli- ocument's effective date on the Department of State's records	cable statutory filing rec	uirements, this date wil	I not be listed	d as t
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e record specifies a delayed effective date, but no The 90th day after the record is filed.	or an enective time	, at 12.01 a.m. on	the earne	:1 01.
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00