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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	SNP Applications LLC
SODJE	Name of Limited Liability Company
The enc	losed Articles of Organization and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	Michael P. Kuhn
	Name of Person
	Fisher Broyles, LLP
	Firm/Company
	4470 Cox Road, Suite 250
	Address
	Glen Allen, Virginia 23060
	City/State and Zip Code michael.kuhn@fisherbroyles.com
	E-mail address: (to be used for future annual report notification)
For furthe	er information concerning this matter, please call:
	Michael P. Kuhn 804 938 4380
	Name of Person Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:
	Filing Fee \$\int \text{S130.00 Filing Fee & Certificate of Status}\$\text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}\$\text{Certified Copy (additional copy is enclosed)}\$
	Mailing Address New Filing Section Street Address New Filing Section

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SNP	Appl	ications	LL	C
~~	PP-	TOWING		v

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

110 East Broward Boulevard, Suite 1700	110 East Broward Boulevard, Suite 1700
Fort Lauderdale, FL 33301	Fort Lauderdale, FL 33301

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Capitol Corporat	te Services, Inc.	
	Name	
155 Office Plaza	Dr. Ste. A	
Florida street addre	ess (P.O. Box <u>NOT</u> ac	ceptable)
Tallahassee	Florida	32301
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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. Titl			iame and Address:
	MBR" = Authorized Me	ember	
	GR" = Manager fBR	c	NP Schneider-Neureither & Partner AG
Alv	IDK	<u> </u>	Possenheimer Landstrasse 100
	,		9121 Heidelberg, Germany
		2	7121 Hoteloug, Collinary
MO	3R	J	oerg Vierfuss
			Doessenheimer Landstrasse 100
			9121 Heidelberg, Germany
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