## L180000007652

(Re	questor's Name)	
(Ad	dress)	
(Ád	dress)	
(Cit	y/State/Zip/Phone #	9
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

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10:	Division of Cor			
SHD IE	BIG SNOO	OK LLC		
SUBJEA	<i>ـــــ</i>	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		JESSICA LAVIN		
			Name of Person	
		BIG SNOOK LLC		
			Firm/Company	
		856 APPLEBY ST		
			Address	
		BOCA RATON, FL 33487	7	
			City/State and Zip Code	
		JLAVIN40@GMAIL.COM		
		E-mail address: (	to be used for future annual report notific	ation)
For furth	ner information co	oncerning this matter, please ca	all:	
JESSIC.	A LAVIN		561 271-5844 at ( )	
	Name o	f Person	Area Code Daytime 7	Felephone Number
Enclosed	d is a check for th	ne following amount:		
<b>S</b> \$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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIED Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIG SNOOK LLC		
(Name of the Lim	ited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited L Florida document number L18000067652	Liability Company were filed on N	ARCII 15, 2018 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company h	ere:
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	18 API
Enter new mailing address, if applicable:		R-2 A
(Mailing address MAY BE A POST OFFICE BOX)		FLORID 1 6: 20
B. If amending the registered agent and registered agent and/or the new registered of	9	n our records, enter the name of the ne
Name of New Registered Agent:	JESSICA O LAVIN	,
New Registered Office Address:	856 APPLEBY ST	
	Enter Flo	rida street address
	BOCA RATON	, Florida <sup>33487</sup>
	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, enter the title, name, and address of each person being added or removed from our records:

MGR = · Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JESSICA O KISER	856 APPLEBY ST	
		BOCA RATON, FL 33487	■ Remove
			☐ Change
MGR	JESSICA O LAVIN	856 APPLEBY ST	<b>⊟</b> Add
		BOCA RATON, FL 33487	Remove
			Change
		<del></del>	Remove
			☐ Change
			Add
		<del></del>	Remove
			□ Change
			Add
			□ Remove
			☐ Change
			Add
			□ Remove
			☐ Change

<i>.</i> . 11 an	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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(If an e	tive date, if other than the date of filing: (optional)  flective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Put  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will		
	ment's effective date on the Department of State's records.		
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on e 90th day after the record is filed.	the earlie	er of:
Date	1 MARCH 28 , 2018 .		
	Signature of a member or authorized representative of a member		
	JESSICA O LAVIN  Typed or printed name of signee		

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Filing Fee: \$25.00