

L20 000230129

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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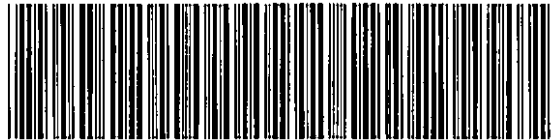
(Business Entity Name)

(Document Number)

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2020 OCT 27 PM 6:16

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OCT 27 2020

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: SNAP - BACK FLORIDA LLC
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:

JOHN MERCADO
Name of Person

SNAP - BACK FLORIDA LLC
Firm/Company

4302 Hollywood Blvd suite 194
Address

Hollywood Florida 33021
City/State and Zip Code

Digital BUILD LLC@gmail.com
E-mail address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

JOHN MERCADO at 609, 892-9929
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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SNAP-BACK FLORIDA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

JUL 31 2:16:16

The Articles of Organization for this Limited Liability Company were filed on 08/30/2020 and assigned
Florida document number L20000230129

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the Limited Liability Company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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 concur that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

MGR JOHN MERCADO 1919 VAN BUREN ST ~~APT~~ ~~417~~ Add
APT 417 A. ☐ Remove
Hollywood FL 33020 ☐ Change

1998. 21 Feb 16

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Date: 9/12/2020

A. B. Clark III
Signature of a member or authorized representative of a member

W A BOST III
Type or printed name of signer

Filing Fee: \$25.00