## Laa000098628

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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Y. SCOTT
JUN 1 0 2023

## **COVER LETTER**

	Registration Division of C					
SUBJEC	Snapin I	J.C				
SOBJEC		Name of Lir	nited Liability Company			
The enclo	osed Articles	of Amendment and fee(s) are sul	bmitted for filing.			
Please re	turn all corres	spondence concerning this matter	r to the following:			
		Rasheem Edward				
			Name of Person	<del></del>		
		Zenbusiness Inc.		· ~2		
			Firm/Company	723		
		336 E. College Ave Suite	301	2023 APR 24		
			Address	£ 1		
		Tallahassee, FL 32301		PH 1: 06		
	City/State and Zip Code fulfillment@zenbusiness.com					
		E-mail address:	(to be used for future annual report not	rfication)		
For further	er information	concerning this matter, please of	call:			
Zenbusir	ness Inc c/o R	asheem Edward	844 4936249 at ()			
	Name	e of Person	Area Code Daytin	ne Telephone Number		
Enclosed	is a check for	the following amount:				
■ \$25.0	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 Addr Registration		Street Address:	etion		
	-	Corporations	Registration Se Division of Co			
I	P.O. Box 63	327	The Centre of	Fallahassee		
•	Fallahassee	. FL 32314	2415 N. Monro	e Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Snapin LLC		
( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company	were filed on $\frac{2/24/2022}{}$ and as	signed
lorida document number L22000098628		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	lity company here:	
napin Carter LLC		
he new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L	1C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	2028	
	2028 AFR	·
	24	er man
nter new mailing address, if applicable:		تعتب
Mailing address MAY BE A POST OFFICE BOX)	No I	<u> </u>
	· · · O	
. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	ddress on our records, <u>enter the name of the ne</u>	w registe
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 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
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			Remove    Remove   Re
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Effective date, if other than the date of	filing: (optional)
If an effective date is listed, the date must be specif	fic and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207
document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not be listed as it of State's records.
e record specifies a delayed effective date, bu	ut not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
rd is filed.	
Dated 4/11	. 2023
/s/Taveares Carter	of a member or authorized representative of a member
Signature	: of a nicroper or authorized representative of a member
Taycares Carter	
<u></u>	Typed or printed name of signee

\*\* . . .

Filing Fee: \$25.00