

L22000390397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

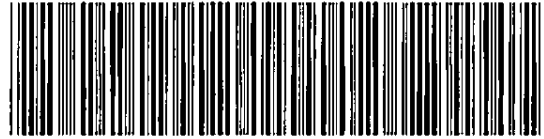
(Business Entity Name)

(Document Number)

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08/28/23--01018--022 \*\*25.00

2023 AUG 28 AM 9:29  
FILE

9/11/2023

**TO: Registration Section  
Division of Corporations**

**SNT Business Solutions**

**SUBJECT:** \_\_\_\_\_  
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:

Presky Cius

\_\_\_\_\_  
Name of Person

SNT Business Solutions, LLC

\_\_\_\_\_  
Firm/Company

2729 NW 79th Ave

\_\_\_\_\_  
Address

Margate, FL 33063

\_\_\_\_\_  
City/State and Zip Code

sntbizsolutions@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Presky Cius

561

321-4367

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

**TO  
ARTICLES OF ORGANIZATION  
OF**

SNT BUSINESS SOLUTIONS, LLC

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

2023 AUG 28 AM 9:29

The Articles of Organization for this Limited Liability Company were filed on 09/07/2022 and assigned  
Florida document number L22000390397

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 "L.L.C."

Enter new principal offices address, if applicable:

2729 NW 79th Ave

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

Margate FL 33063

Enter new mailing address, if applicable:

2729 NW 79th Ave

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

Margate FL 33063

**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:

Presky Cius

New Registered Office Address:

2729 NW 79th Ave

*Enter Florida street address*

Margate

Florida

33063

*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**

or removed from our records:

**MGR = Manager**

**AMBR = Authorized Member**


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Presky Cius	2729 NW 79th Ave	<input checked="" type="checkbox"/> Add
		Margate FL 33063	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Sandra Thelusma	835 NW 155th LN Apt 306	<input type="checkbox"/> Add
		Miami FL 33169	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(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.

August 21st, 2023



Signature of a member or authorized representative of a member

Typed or printed name of signee