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PROFESSION AND ADDRESS OF THE PROFES

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SNAPPY GROUP OF COMPANIES LLC

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9/21/2023 11:25:35 PD? To 18506176383 Page: 2/4 From Registered Agents Inc Fax: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Snappy Group of Companies LLC (Name of the Limited Liability)	y Company as it now appears on our records. Limited Liability Company))
(A Florida)	Timited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 02/10/23	and assigned
Florida document number L23000075948		
This amendment is submitted to amend the following:	- '	
ans affectioned is subfatted to affected the following.		
Λ . If amending name, <u>enter the new name of the limit</u>	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LEC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	•	
 If amending the registered agent and/or registered 	l office address on our records, <u>enter t</u> l	he name of the new regi
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street address	,
	, Flor	rida <u>≥</u>
	Cuv	Z., at Nije.

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.

9/21/2023 11:25:35 907

To 18506176383

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From Registered Agents Inc.

Fax. 8134365206

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Richard Swaller	7901 4TH ST N STE 300	X Add
		ST. PETERSBURG, FL 33702	©Remove
			□Change
			□Remove
			[]Change
			🖾 Add
			□Remove
			FlChange
			[7] Add
			□Remove
			[]Change
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		 -		
Effective date, if other than the firan effective date is listed, the date many effective date inserted in this bedocument's effective date on the I	st be specific and cannot be p lock does not meet the ap	mor to date of filing or m plicable statutory filin	ore than 90 days after fiting) P	fursuant to 605,0207 ill not be listed as
e record specifies a delayed effecti rd is filed.	re date, but not an effectiv	ve time, at 12:01 a.m.)	on the earlier of: (b) The s	20th day after the
Dated September 21st	2023			
Patrice James				

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