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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

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

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## LLC REGISTERED AGENT CHANGE SNOPUBLISHING, LLC

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited lia	bility company: SNO	PUBLIS	ℲING, L	LC_			
(a) 7901 4th St N	7901 4th St N STE 300			(b) 7901 4th St N STE 300			
Principal office	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
St. Petersbur	St. Petersburg, FL 33702			St. Petersburg, FL 33702			
04/04/23	04/04/23			L23000168538			
Date of fill	ng/registration in Florida	4.		Document number	ег		
(a)							
` · <del></del>	egistered Office shown on the rec	cords of the Floric	a Dept. of State.				
Registered Office Addi	ess ( <u>MUST BE FLORIDA ST</u>	TREET ADDRES	<u></u>				
	·-						
(17)	Registered Age						
Enter name of <u>NEW Ro</u>	gistered Agent and/or NEW Re	gistered Office a	<u>ldress</u> :				
7901 4th S	St N						
NEW Registered Offic	e Address:						
STE 300	STE 300				<b>.</b>	<b>~</b> 3	
St. Peters	ourg	Fl. 3370	2			2023 A	
e change or changes are igent will be identical. Or as/were authorized by an	pany is not organized under made, the Florida street add in the case of a Florida lin affirmative vote of the men or the operating agreement	lress of the reg nited liability o mbers of the lir	istered office company, it is nited liability	and the business hereby confirme company or as c	office of d that the	the register change(s)	
	mith		at Smith		<u> </u>	59	
Signature of a member or auth	orized representative of a membe	II .		Printed or typed nar	ne of signee		

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.

Taylor Newman - Assistant Secretary

Signature of Registered Agent