

M21000011132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

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TALLAHASSEE


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NOV 10 2021

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 205159 7578406  
AUTHORIZATION :   
COST LIMIT : \$ 25.00

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ORDER DATE : November 8, 2021  
ORDER TIME : 8:37 AM  
ORDER NO. : 205159-010  
CUSTOMER NO: 7578406  
-----

FOREIGN FILINGS

NAME: SNATCHED FL, LLC

\_\_\_\_ CORPORATE  
\_\_\_\_ LIMITED PARTNERSHIP  
XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER: \_\_\_\_\_

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Snatched FL, LLC

Enter new principal office address, if applicable: N/A

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

Enter new mailing address, if applicable: N/A

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

2. The Florida document number of this limited liability company is: M21000011132

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 08/25/2021

## SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Mi&MORE, LLC  
(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: N/A

New Registered Office Address: N/A

*Enter Florida Street Address*

Florida

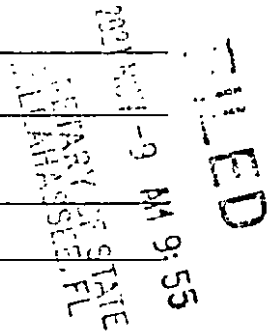
City

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



7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

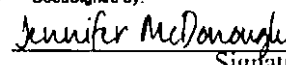
N/A

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

N/A

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

DocuSigned by:  
  
 3FA67D8D4FD54CF ... Signature of the authorized representative

Jennifer McDonough, President

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

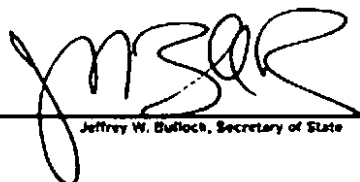
# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "SNATCHED FL, LLC", CHANGING ITS NAME FROM "SNATCHED FL, LLC" TO "MI&MORE, LLC", FILED IN THIS OFFICE ON THE EIGHTH DAY OF NOVEMBER, A.D. 2021, AT 10:49 O`CLOCK A.M.



  
Jeffrey W. Bullock, Secretary of State

**STATE OF DELAWARE  
CERTIFICATE OF AMENDMENT**

**SNATCHED FL, LLC**

This Certificate of Amendment was duly executed and is being filed in accordance with Section 18-202 of the Delaware Limited Liability Company Act.

**FIRST:** The name of the limited liability company is **SNATCHED FL, LLC** (the “Company”).

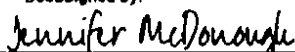
**SECOND:** The Certificate of Formation of the Company is hereby amended as follows:

Paragraph First is amended and restated in its entirety to read as follows:

“**FIRST:** The name of the limited liability company is **Mi&MORE, LLC.**”

**IN WITNESS WHEREOF**, the undersigned has executed this Certificate of Amendment on the 5th day of November, 2021.

**AUTHORIZED PERSON:**

DocuSigned by:  
  
3FA87D8D4FD54CF...

Jennifer McDonough, President

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 10:49 AM 11/08/2021  
FILED 10:49 AM 11/08/2021

SR 20213728980 - File Number 6186837