915000022117

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone i	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	<u>_</u>
Certified Copies	_ Certificates o	of Status
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January 19, 2021

CAPITAL CONNECTION

SUBJECT: SN SN AND S INVESTMENT, INC.

Ref. Number: P15000022117

We have received your document for SN SN AND S INVESTMENT, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 721A00001092

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SN SN AND S INVESTMENT, IN	C.	
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art, of Amend, File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
Signature .	1	Vehicle Search
		Driving Record
Requested by: Seth		UCC 1 or 3 File
	Time	UCC 11 Search
Name Date	Time	UCC 11 Retrieval
Walk-In Will Pick Up		Courier

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: SN SN AND S IN	IVESTMENT, INC.	·
DOCUMENT NUMI	BER: P15000022117		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	SHANNON MICKENS SR		
		Name of Contact Person	n
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	3126 NOLAN ST		
	JACKSONVILLE, FL 3225	Address 6	
		City/ State and Zip Cod	e
	snsnands20@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	a concerning this matter, pleas	se call:	
SHANNON MICKEN	S SR	904 at (999-8152
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi: P.O.	ing Address indment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 i	Address Iment Section on of Corporations entre of Talkahassee S. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

SN SN AND SINVESTMENT, INC.

	of Corporation as currently file	d with the Florida Dept. of State)	
P15000022117			
	(Document Number of Corp	poration (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>Florid</i>	da Profit Corporation adopts the following	; amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc." or "Ca", A prop	my," or "incorporated" or the abbreviation fessional corporation name must contain	_The new n "Corp.," i the word
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>	if applicable: TREET ADDRESS)		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	icable: OFFICE BOX)		
D. If amending the registered agent an new registered agent and/or the new	ud/or registered office address in w registered office address:	Florida, enter the name of the	
Name of New Registered Agent	SHANNON MICKENS SR		E 111
	3126 NOLAN STREET	(n)	京王し
	tFlorida street ade	tion (T	્યું છે.
New Registered Office Address:	JACKSONVILLE	32254 T	
	(Cuy)	(Zip C)	ode)
New Registered Agent's Signature, if e I hereby accept the appointment as regist	ered agent. Tam familiar with a	nd accept the obligations of the position. red Agent, if changing	
Check if applicable	Signature of New Keyiste.	rea Agent, if changing	

 \Box The amendment(s) is are being filed pursuant to s, 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

A_Change	<u>1- 1</u>	John 170c	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	MICKENS, SHANNON, JR.	1549 W 25TH STREET
Add			JACKSONVILLLE, FL 32209
X Remove			
2) Change	D 	MICKENS, ROSCOE, JR	1549 W 25TH STREET
Add			JACKSONVILLLE, FL 32209
X Remove 3) Change	AR	LYDE, ROSALIND	1549 W 25TH STREET
Add			JACKSONVILLE, FL 32209
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

n amendment provides for an exchange, reclassification, or cancellation of issued shares.	amending or adding additional Artach additional sheets, if necessary)	(Be specific)	•		
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an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	·				
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	(if not applicable, indicate N/A)	endment if not contai	ned in the amend	<u>lment itself:</u>	
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		 			<u> </u>
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date this document was signed.) adoption:	, if other than the
Effective date <u>if applicable</u> :	12-22-25 too more than 90 days after amendment file date	,
	tno more than 90 days after amendment file date	7
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirement. Department of State's records.	us, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE)</u>	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharel	nolder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the an e sufficient for approval.	aendment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The followi for each voting group entitled to vote separately on the amendme	ng statement ntis):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
SM UPDE Dated	01-15-21	
Signature 🗵	human Medeb	
sele	a director, president or other officer - if directors or officers have cted, by an incorporator - if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	
	SHANNON MICKENS SR	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	