(Red	questor's Name)	,
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e <b>#</b> )
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2013 DEC -4 PM 12: 50

## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return all correspo	ndence concerning this matter	to the following:	
	Eleonora To	daro	
		Name of Person	
	jet set group	IIc.	
		Firm/Company	
	860 Collins a	avenue unit 207	
	•	Address	· · · · · · · · · · · · · · · · · · ·
	Miami Beach	n, FL 33139	
		City/State and Zip Code	
	info@jetsetgroup	IIC.COM o be used for future annual report notificat	ion)
For further information co	oncerning this matter, please ca	·	, and the second
Eleonora To	odaro	at (305) 7983095	5
Name of	Person	Area Code & Daytime To	
Enclosed is a check for th	e 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2013 DEC -4 PM 12: 50 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Sunshine in Sobe LLC

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

The Articles of Organization for this Limited Liability Compa	ny were filed on 06/23/2008	and assigned
Florida document number L08000061320		
This amondment is submitted to associated C.H.		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited list	ability company here:	
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·	
Fatamana madii addama if a R		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	****	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered	office address on our records, ent	er the name of the new
registered agent and/or the new registered office address he	<u>ere</u> :	
Name of New Registered Agent:		-
New Registered Office Address:		
	Enter Florida street	address
	, Florida	l
	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 608, 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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Eleonora Todaro	860 Collins Avenue	✓Add
		Miami Beach	Remove
		FL, 33139	
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
····			Add
			Remove

D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
<del></del>	
<sub>Dated</sub> Mian	ni 12/02/2013
	lles Totica
(	Signature of a member or authorized representative of a member  Olga Posocco
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00