

FROM

Division of Corporations

L11000107092

(TUE) NOV 25 2014 14:44/ST. 14:44/No. 8304918580 P 1

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : FEINBERG AND MAIDENBAUM
Account Number : 120070000045
Phone : (954) 962-8889
Fax Number : (954) 966-6259

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: feinberg@bellsouth.net

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SUN KING INVESTMENTS, LLC

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE
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NOV 26 2014

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SUN KING INVESTMENTS, 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 Company were filed on 09/19/2011 and assigned Florida document number L11000107092

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

275-189 TERRACE
SUNNY ISLES, FL 33160

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

275-189 TERRACE
SUNNY ISLES, FL 33160

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TREASURER OF FLORIDA

B. If amending the registered agent and/or registered office 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: _____

New Registered Office Address: _____

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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JEFFREY FEINBERG	4651 Sheridan Street	<input type="checkbox"/> Add
		Suite 200	<input checked="" type="checkbox"/> Remove
		Hollywood, FL 33021	
MGR	YAKOV COHEN	275-189 TERRACE	<input checked="" type="checkbox"/> Add
		SUNNY ISLES, FL 33160	<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

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated November 25, 2014



Signature of a member or authorized representative of a member

JEFFREY FEINBERG

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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