15000086490

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COVER LETTER

TO: Registration Se Division of Cor		· · · · · · · · · · · · · · · · · · ·		
6141 SUNS	ET OFFICES LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Glenn E. Gelband, Esq.			
		Name of Person		
	Law offices of Glenn E. Go	elband	•	
		Firm/Company		
	1812 Front Street			
		Address		
	Scotch Plains, NJ 07076		77 20 E	
	ggelband@gmail.com	City/State and Zip Code	AHASS	Francisco (Maries
	E-mail address: (to be used for future annual report notific	cation)	
For further information co	oncerning this matter, please ca	all:		Ü
Glenn E. Gelband, Esq.		908 272-7794 at ()	2 25 0864 0864	
Name o	Person		Telephone Number	•
Enclosed is a check for the	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 enclo	

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

6141 SUNSET OFFICES LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)		
he Articles of Organization for this Limited Liability Company lorida document number L15000086490	were filed on 05/15/2015 and assigned		
his amendment is submitted to amend the following:			
If amending name, enter the new name of the limited liab	pility company here:		
,			
ne new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."		
nter new principal offices address, if applicable:	c/o Glenn E. Gelband, Esq.		
Principal office address MUST BE A STREET ADDRESS)	1812 Front Street		
	Scotch Plains, NJ 07076		
nter new mailing address, if applicable:	c/o Glenn E. Gelband, Esq.		
Aailing address MAY BE A POST OFFICE BOX)	1812 Front Street		
	Scotch Plains, NJ 07076		
. If amending the registered agent and/or registered ogsistered agent and/or the new registered office address her Name of New Registered Agent:	*·- <u></u> **		
New Registered Office Address:	Pick D promp		
	Enter Florida street anaress		
	City Florida Zip Code		
	City 3.75 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member <u>Title</u> Name **Address** Type of Action ☐ Add □ Remove ☐ Change _□ Add □ Remove ☐ Change _□ Add ☐ Remove Change. DòÁď □ Remove ☐ Change □ Add ☐ Remove _□ Change □ Add ☐ Remove

_□ Change

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fective date, if other tha	n the date of filing:			(optional)	
n effective date is listed, the da	te must be specific and cann	ot be prior to date of	filing or more than 90 da	lys after filing.) Pursuant to 605	5.020
cument's effective date on			nory ming requiremen	nts, this date will not be list	ieu a
	-				
record specifies a de	ayed effective date,	, but not an eff	ective time, at 12	2:01 a.m. on the earli	er c
The 90th day after the	record is filed.				
ted August 23	20	16			
ted			_		
1/ //	2 Joseph S	<i>'</i>			

Page 3 of 3

Typed or printed name of signce

Filing Fee: \$25.00