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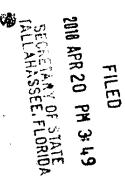
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C. GOLDEN APR 23 2018

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CODPODA	ATION: SUN S	tate Leasing	3. Inc	
DOCUMENT NUMBI	ATION: SUN S ER: F396	07		
	Amendment and fee are su			
		_		
Please return all corresp	ondence concerning this mat			
_	ANDRE	Name of Contact Person tate Leasing Firm/ Company leccers Ferner Address		
		Name of Contact Person	1	
	500 5	tote Leasing	THE	
		Firm/ Company		
	126 M	lercers Ferner	y Road	
		Address		
	Delano	FC 327 City/ State and Zip Code	20	
		City/ State and Zip Code	e	
	Susta	to lacino		
 	E-mail address: (to be us	teleasing @ sed for future annual report	notification)	
		•		
For further information	concerning this matter, pleas	e call:		
ANDREL	UTROTA	at (386	738-46 de & Daytime Telephone Number	
	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

Ai	Articles of Incorporation of	
Sun State 1	ans in Tak	2018 APR 20 PM 3: 45
(Name of Corporation	as currently filed with the Florida Dept.	of State)
F 3°	7607	TALLAHASSEE, FLORID,
(Documer	nt Number of Corporation (if known)	5
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	tatutes, this Florida Profit Corporation adop	pts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A professional corporation	
B. Enter new principal office address, if applicable:	126 Merce	is Ferney RoAD
(Principal office address <u>MUST BE A STREET ADDR</u>	Delano, FL	32720
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	126 Merca Delano, F	ers Ferney Ropo L 32720
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, F	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	ered Agent: am familiar with and accept the obligations o	of the position.
Signati	ure of New Registered Agent, if changing	····

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)

٠, •

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: X Change	<u>PT</u> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>M</u> i	ike Jones	
X Add	SV Sa	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u> </u>	LEONARO Troiq	Delano, FL 32720
Add Remove			Velano, FL 32720
2) Change Add	<u>S</u>	Jean M Troig	1503 S. Riverside Drive Edgeweter, FL 32137
Remove 3)ChangeAdd			
Remove			
4) Change Add			
Remove			
Add			
6) Change			
Remove			

L. <u>II an</u> (Atta	nending or adding additional Articles, enter change(s) here: the additional sheets, if necessary). (Be specific)
	
. <u>If an</u> pro	amendment provides for an exchange, reclassification, or cancellation of issued shares, risions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
_	

Section 1		DU/17/14		
The date of each amendment(s) add date this document was signed.	option:	04/11/18		, if other than the
Effective date if applicable:				
	(no	o more than 90 days after an	nendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep			filing requirements, this d	ate will not be listed as the
Adoption of Amendment(s)	(CHECH	K ONE)		
☐ The amendment(s) was/were adop by the shareholders was/were suf			tes cast for the amendment((s)
☐ The amendment(s) was/were appr must be separately provided for e				ent
"The number of votes cast for			• •	
by				
	(voting g	group)		
The amendment(s) was/were adopt action was not required.	ted by the boar	d of directors without shareh	nolder action and sharehold	er
☐ The amendment(s) was/were adoptaction was not required.	eted by the incom	rporators without shareholde	er action and shareholder	
Dated4	117 /18 Jun	1/m		
Signature (By a dir	ector, president	t or other officer - if director	rs or officers have not been	
selected	by an incorpor	rator - if in the hands of a re		
appointe	d fiduciary by t	that fiduciary)		
_	A	NOREW TROIA ed or printed name of person		
_	(Тур	ed or printed name of persor	n signing)	
		President		
-		(Title of person signi	ng)	