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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration Division of	on Section Corporations		
SUBJECT:	Sunshine E	ngineering Ltd. Co.	
		ited Liability Company	
	es of Amendment and fee(s) are sur		
		Kathryn J. Lyden	
		Name of Person	
	Suns	hine Engineering Ltd. Co.	
	_	Firm/Company	
,		18093 O'Hara Drive	200 TAL
		Address	2009 DEC 24 SECRE FARY (ALL AHASSEE
•	Po	Port Charlotte, FL 33948	
	٠.	City/State and Zip Code	DEC 24 PM:
	E-mail address: (klyden@comcast.net (to be used for future annual report notification)	PM 3: 08 OF STATE E. FLORIDA
For further informat	ion concerning this matter, please	call:	10A
	Kathryn J. Lyden	at (_941) 743-3	
Na	ame of Person	Area Code & Daytime Teleph	one Number
Enclosed is a check	for the following amount:		
\$25.00 Filing Fe	e \$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)
Re	AILING ADDRESS: egistration Section evision of Corporations	STREET/COURIER AD Registration Section Division of Corporations	DRESS:

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunsh (<u>Name of the Limited Li</u> (A F	nine Engineering Ltd. (ability Company as it now apper orida Limited Liability Company)	CO. ars on our records.)	
The Articles of Organization for this Limited Liab Florida document number L02000073	· · · ·	March 27, 2002	_ and assigned
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	ne limited liability company ho	ere:	
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Comp	pany," the designation "Did	? 3
Enter new principal offices address, if applicab	le:	HA:	E T
(Principal office address MUST BE A STREET.	ADDRESS)	SSE EB	·
Enter new mailing address, if applicable:		E. FLORIDA	
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:	E	inter Florida street addre:	s,s
•	, 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 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** Address Title Name Mgr Basim H. Hiawy 18093 O'Hara Drive ☐ Add Remove Port Charlotte, FL 33948 ☐ Add ☐ Remove ☐ Add Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 9 Signature of a member or authorized representative of a member Fatnan J. Warn
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00