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J. SAULSBERRY EXAMINER

MAY 21 2012

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	Sunrist Ve Name of Limi	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Alber	to Tudela Name of Person		
		77. 70		
	3023 N	Firm/Company E Quaysicle C Address	SECRETAR ALLAHASS	
	Mami	FL 33/38 City/State and Zip Code	8 AM BR	m
	alg aljo	to be used for future annual report notifical	₽ ₩ 2 ;	
For further information	concerning this matter, please of	·	•	
Alberto Name	Tucle/a	at (7/3) 397- Area Code & Daytime T	elephone Number	
/				
Enclosed is a check for	the 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)	ed)

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

Surise W	knec UC
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Comparition for the Limited Liability Comparison of the Li	ny were filed on 4/1/07 Exand signed
This amendment is submitted to amend the following:	SSEC.F
A. If amending name, enter the new name of the limited li	
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	3023 NE Quaysicle (n
(Principal office address MUST BE A STREET ADDRESS)	
	Migmi, FL 33138
Enter new mailing address, if applicable:	4329 Verone St
(Mailing address MAY BE A POST OFFICE BOX)	HOUSTON, FX 77701
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address on our records, enter the name of the never
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida, Zin 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 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 <u>Title</u> <u>Name</u> **Type of Action** Alberto Tudela 537 NE 96th Remove ☐ Add Remove ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

	From MGRM to MGR	Alserto	100	sle/i
		SECA	2812 HAY	-
Dated _	5/17/2012	ETARY OF S HASSEE, FL	HV BILLY	
	Signature of a member or authorized representative of a member ALBERTO TUDE LA Typed or printed name of signee	STATE	9: 32	U

Page 2 of 2

Filing Fee: \$25.00