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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) rtified Copies Certificates of Status pecial Instructions to Filing Officer:		
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SUBJECT:				
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The enclosed Articles of	Amendment and fee(s) are sub	mittee for filing.		ب
Please return all correspo	ondence concerning this matter	to the following:		
	Audrey Ruggieri			
		Name of Sustin		
	Sundance Group, EEC			
		Firm/Company	. MARKET 1-8-4	
	Sentiance Group, ELC Author of Electric Establish Commany enclosed Articles of Amendment and feets) are submitted for filling, se return all correspondence concerning this matter to the following: Author Ruggieri Name of Power Sendance Group, ELC Franc Compsey 9864 Delegates Drive Address Orlendo, FL 32887 John Compsey 9864 Delegates Drive Address Orlendo, FL 32887 John Compsey 9864 Delegates Drive Address Orlendo, FL 32887 John Compsey 9864 Delegates Drive Address Orlendo, FL 32887 John Compsey 9864 Delegates Drive Address Orlendo, FL 32887 John Compsey 9864 Delegates Drive Address Orlendo, FL 32887 John Compsey 1			
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For further information 2				
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Mailing Addres		<u>Street Address:</u>		
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Tallahassee, FL 32314

The Centre of Tallahassee 2405 N. Monroe Street, Suite 810 Talishassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sundance Group, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Lumied Liability Company)

The Articles of Organization for this Limited Liability Comparida document number 1.04000056448	any were filed on	20 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
he new name must be distinguishable and contain the words "Limited I	inbility Company " the design	otion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		·
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered offi gent and/or the new registered office address here:	ce address on our recor	ds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida si	Prost address
	City	Florida Zip Code
w Registered Agent's Signature, if changing Registered Age	ent:	
vereby accept the appointment as registered agent and envisions of all statutes relative to the proper and complete the obligations of my position as registered agent ing filed to merely reflect a change in the registered off impany has been notified in writing of this change.	lete performance of my (as provided for in Chap	duties, and I am familiar with and need to the open of

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:

MCR = Manager AMBR = Authorized Member

<u>l'itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Sarah Ruggieri	9564 Delegates Drive, Orlando, FL 32837	≡ Add
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an effective date is listed, the date must be ofc: If the date inserted in this block	specific and cannot be prior times now two times now the times are in-	to date of filing or more the	an 90 days after filing) Pursuant to	o 605,020 - Usastia
ocument's effective date on the Dopa	atment of Grate's records	·		· Hote G ti
record specifies a delayed effective d. Lis filed.	ate, but not an affective i	ime, at 12:01 a.m. on th	e earlier of: (b) The 90th day	after the
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	GLOC gature of a member or author	orized representative of a	nember	

Filing Fee: \$25.00