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SECRETARY OF STATE

T. HAMPTON

NOV 1 2 2008

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: SUNNY		nited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	John Ioannou		
		(Name of Person)	
	loannou & Ioannou, LLP		
		(Firm/Company)	
	11125 NW 124TH STRE	ET	•
		(Address)	
	MEDLEY FL 3	33178 (City/State and Zip Code)	
For further information co	oncerning this matter, please c	all:	
John Ioannou		at (786) 787-0425	
(Name o	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for th	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 enclosed)

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

SUNNY BROOK, LLC			
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our recor Liability Company)	<u>ds.</u>)	
The Articles of Organization for this Limited Liability Company	were filed on 02-09-2006		and assigned
Florida document number L06000014619			_
his amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited liab	pility company here:		
he new name must be distinguishable and end with the words "Lim	ited Liability Company "the design	ation "I I C"	or the abbreviat
L.L.C."	ned Liaomity Company, the design		of the abblevial
nter new principal offices address, if applicable:		SE SE	
Principal office address MUST BE A STREET ADDRESS)		<u> </u>	
		(5) 35 (6) 20 -	- Photographic Co.
nter new mailing address, if applicable:	785 S. Buffalo Grove Road		
Mailing address MAY BE A POST OFFICE BOX)	Buffalo Grove, IL 60089		•
	-	<u> </u>	-
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her		enter the n	ame of the
Name of New Registered Agent:			
New Registered Office Address:	(Enter Florida st	reet address)	
	, Flor	ŕ	
	(City)		ip 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> **Address Type of Action MGR** Jane Goldman 16711 Collins Avenue TS-02 ■ Add Sunny Isles, FL 33160 ■ Remove MGR Gene Schloss 622 Dunsten Circle **□** Add Northbrook, IL 60062 Remove MGR Michael Goldman, as Trustee 785 S. Buffalo Grove Road **₽** Add Remove of Michael Holdman Tweet, Buffalo Grove, IL 60089 dated 7/21/08 ☐ Add Remove 🗖 Add ☐ Add ☐ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated October Signature of a member or authorized representative of a member Slava Rozhko

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00