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D. BRUCE

JUN 14 2011

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJ	Name of Limited Liability Company	
The e	nclosed Articles of Amendment and fee(s) are submitted for filing.	
Please	e return all correspondence concerning this matter to the following:	
	Manica Flowers Crews  Name of Person  Sur Stream Realty, LLC  Firm/Company  6231 FSTFRC Boulevard  Address  Fort Myers Beach FL 33931  City/State and Zip Code  Manicafa Sur Stream: com	11 JUN 13 PM 8: 50 SECONDIARY OF STATE SALLAHASSEE, FLORID
- C	E-mail address: (to be used for future annual report notification)	>
	Ther information concerning this matter, please call:    CN CA Flewers Crews at (239) 765-4111   Name of Person Area Code & Daytime Telephone Number	r
	(additional copy is enclosed) Certified	ite of Status &

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

SunStream t	SERTLY, L	LC:		
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it nów ap lited Liability Compar	<b>pears on our record</b> ny)	<u>ls.</u> )	
The Articles of Organization for this Limited Liability ComFlorida document number <u>Lの6000664つの</u> .	pany were filed on _	06-26-2	2006 and assigned	
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited</u>	l liability company	<u>here</u> :		
The new name must be distinguishable and end with the words 'L.L.C."	"Limited Liability Co	mpany," the designa		 iation
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRES	<u></u>		% <b>~ ~</b>	
		•		•
Enter new mailing address, if applicable:			<b>E</b> E	
Mailing address MAY BE A POST OFFICE BOX)				
Maning duaress WAT BE AT OUT OF THE BOXY	<del></del>			_
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		on our records, <u>e</u>	nter the name of the	new
Name of New Registered Agent:				
New Registered Office Address:		Foton Florida	at adduses	_
	Enter Florida street address			
		, Flori		
	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 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
<u>mgR</u>	Justin LAWrence	6231 FSTERC Boulevard Fort Myers Beach FL 3393	_ <b>⊠</b> Add <u>∤</u>
MGR	Mary A Baker	6231 Estera Boulevard Fort Myers Beach FL 3393	Add □ X Remove
			Add Remove 
	<del></del>		Add Remove 
			Add Remove 
			Add Remove _
D. If amendi	ng any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	
		AHASSEE, FL	A SI MIC DE
Dated	lay 27, 201	RATE.	- <del>.</del>
	Signature of a member of	r authorized representative of a member	
_	Typed o	r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00