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(Requestor's Name)

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(Address)

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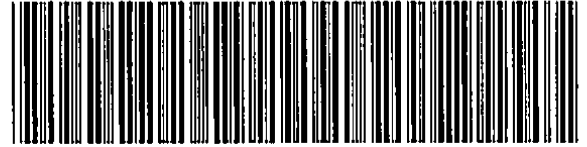
(Business Entity Name)

(Document Number)

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SOUTHERN DISTRICT OF CALIF
FBI LOS ANGELES

JUL 29 2013
- SCHROEDER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

Sunshine Shuttles LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hernan Salas

Name of Person

Sunshine Shuttles.

Firm/Company

1314 E Las Olas Blvd. Suite 1032

Address

Ft Lauderdale, FL 33301

City/State and Zip Code

Her salas0509@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hernan Salas

Name of Person

at (954) 934-7874

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

PAID

☐ \$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

Sunshine Shuttles LLC

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

The Articles of Organization for this Limited Liability Company were filed on 10/18/2006 and assigned Florida document number L06000/00788.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA			

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Alexan Oro Salas

New Registered Office Address:

1314 E Las Olas Blvd Suite 1032
Enter Florida street address

Fort Lauderdale Florida 33301
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 605, 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.

Alexan Oro Salas

If Changing Registered Agent, Signature of New Registered Agent

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FBI

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated July 2nd 2019

Signature of a member or authorized representative of a member

Hernan Salas
Typed or printed name of signee