# L07000086980

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE
VISION OF CURPERATIONS

APR 1 6 2012

## **COVER LETTER**

	Pont Sun	uny Florido III C	,		
SUBJECT:		Iny Florida, LLC ted Liability Company	·		
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
		Connie A. Richards			
		Name of Person			
	Rent Sunny Florida, LLC Firm/Company				
	28	68 Majestic Isle Drive			
		Address			
		Clermont, FL 34711			
tu.	conni E-mail address: (t	City/State and Zip Code  @@rentsunnyflorida.com  be used for future annual report notific	eation)		
For further information	concerning this matter, please co	•			
	nie A. Richards	ut (	218-6888		
Name	of Person	Area Code & Daytime	Telephone Number		
Enclosed is a check for t	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)		

### **MAILING ADDRESS:**

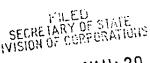
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT

# TO ARTICLES OF ORGANIZATION SECRETARY DE STATIONS **OF**



12 APR 13 AM 11: 20

(Name of the Limite	Rent Sunny d Liability Compa A Florida Limited 1	Florida, LLC ny as it now appears Liability Company)	on our records.)			
The Articles of Organization for this Limited   Florida document number	• • •	were filed on	08/24/2007	and assigne	ed:	
This amendment is submitted to amend the fo	llowing:					
A. If amending name, enter the new name	of the limited liab	oility company here:				
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Compan	y," the designation "I	LLC" or the abbre	eviation	
Enter new principal offices address, if applicable:		2868 Majestic Isle Drive				
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:		Clermont, FL 34711				
		2868 Majestic Isle Drive				
(Mailing address MAY BE A POST OFFICE BOX)		Clermont, FL 34711				
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	or registered of office address her	<u>e</u> :	r records, <u>enter t</u>	the name of th	e new	
New Registered Office Address: 2868 Majestic Isle Drive						
	Enter Florida street address					
		Clermont	, Florida	34711		
		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.

Page 1 of 2

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 Title Name Type of Action Address Connie A. Richards Mmgr ✓ Add
☐ Remove 2868 Majestic Isle Drive Clermont FL 34711 Thomas S. Richards Mgr 3750 Peaceful Valley Drive ☐ Add Clermont FL 34711 **√** Remove ☐ Add Remove Add Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

·	
April 9 2012  Ounil Richards	

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00