LU7000119354

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doct	ıment Number)	<u>-</u> -
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

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2018 DEC -3 PM 1:29



COVER LETTER

	Registration Se Division of Cor		• •				
SUBJEC		Sunrise LLC					
SOBJEC		Name of Lim	ited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	turn all correspo	ondence concerning this matter	to the following:				
		Orestes Santos					
			Name of Person				
		1/200 NW 13 A	Firm/Company				
		16290 NW 13 Ave.	Address				
		Miami Gardens, FL 33169					
		ovs921@gmail.com	City/State and Zip Code				
		E-mail address: (to be used for future annual report notific	cation)			
For furth	er information c	oncerning this matter, please ca	all:			• •	
Gino Sa	ntos		305 785-6191 at ()			291 1 C	- []
		f Person	Area Code Daytime	Telephone Number		DEC -3	general P
	l is a check for the	ne following amount: ☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	1000 1000 1000 1000 1000 1000 1000 100	PM 1:29	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2670 East Sunrise LLC		
(Name of the Limited Liability Compa (A Florida Limited I	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L07000119354	were filed on 11/29/2007 a	nd assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviat	lion "L.L.C."
Enter new principal offices address, if applicable:	16290 NW 13 Ave.	
Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33169	
Enter new mailing address, if applicable:	16290 NW 13 Avc.	
Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33169	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	•	name of the new 22
	. Florida	· · · · · · · · · · · · · · · · · · ·
		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.

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u> Hilda Santos	Address 4160 W 5th Ct. Hialeah, FL 33012	Type of Action
MGR			Add
			Remove
			☐ Change
MGR	Enrique O. Santos	13140 SW 28th Ct. Davie, FL 33330	
			☐ Remove
		<u></u>	Change
MGR	Juan Carlos Santos	633 Mer Rouge Drive Nolensville, TN 37135	
			☐ Remove
			Change
			□ Add ≥ □ □ Add ≥ □ □ □ Add ≥ □ □ □ □ Add ≥ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
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					281
					# 0EC
Effective date, if other than the (if an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	ck does not meet the appli	icable statutory filing re	(optional) than 90 days after filing.) Purequirements, this date will	suant to 605.0207 (3)(b) not be listed as the	
the record specifies a delayed) The 90th day after the reco		ot an effective tim	e, at 12:01 a.m. on	the earlier of:	(0)
Dated November 28	, 2018	- Jan			

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Typed or printed name of signee

Filing Fee: \$25.00