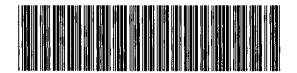
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SECRETARY OF STATE

J. SAULSBERRY EXAMINER

 $V_{i,0}$. China

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Sun ISLAND ENTERPRISES LIMITED, LLC. Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:	ì
Michael Belichter Name of Person SEE AND SON THE STATE OF STATE O	
Sun Island Ent. La. hhc Firm/Company	
3830 South Hamson A1A 14-109	
MELBOURDE BEACH. FL. 32951. City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Muchael Belicher at 321 723 - 53 64 Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 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:

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company	as it now appears on our	records.)	_
	were filed on $\sqrt{2}$	0 200 Tand	l assigned
Tronda document named pro-	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) es of Organization for this Limited Liability Company were filed on 12 20 2007 and assigned cument number 10700126162. Identify the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company," the designation "LLC" or the abbreviation of principal offices address, if applicable: Indicate address MUST BE A STREET ADDRESS) In address MUST BE A STREET ADDRESS) In address MAY BE A POST OFFICE BOX) In address MAY BE A POST OFFICE BOX) In address MAY BE A POST OFFICE BOX In address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Florida Florida		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) anization for this Limited Liability Company were filed on 12 20 Z and assigned number 107000 Z 6 162. submitted to amend the following: same, enter the new name of the limited liability company here: be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation all offices address, if applicable: and offices address, if applicable: and assigned output 12 20 Z and assigned number 12 20 Z a		
	ed Liability Company," the d	esignation "LLC" or	the abbreviation
"L.L.C."			*
Enter new principal offices address, if applicable:		Più P	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		Ar Ar	<u> </u>
		\$ 1	
		9.5% 6 .0%	, <i>(</i>
Enter new mailing address, if applicable:		A A	ma programme of the second sec
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Maning duaress MAT DE A POST OFFICE BOX		S 8))
B. If amending the registered agent and/or registered office address here		rds, <u>enter the n</u> an	ne of the new
Name of New Registered Agent:	Address: Continued Liability Company as it now appears on our records.		
New Registered Office Address:	п. п.		
	Enter Florid	ia street address	
	,		
	Citv	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 = Managér MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	WEINBANM, ROCHELLE	3830 SOUTH HIGHWAY AIA	Add
·		Suite 4-109 MELBOURNE BEART. H.3	12951.
			Add
			Remove
			_
			Add
			S Remove
		AHASSE SE	Remove 77 NOV -6
 -		SEC. FLORIBA	Add
			_ ,
			- -
			Add
			Remove
			-
 			_
			_ Remove

Daga 2 of

f an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
l	Movember St., 2012.
	MBA.
	Signature of a member or authorized representative of a member
	MICHAEL BELCHER
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00