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| (Requestor's Name) | | | | | | |
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| (City/State/Zip/Phone #) | | | | | | |
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| (Business Entity Name) | | | | | | |
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| Certified Copies Certificates of Status | | | | | | |
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| Special instructions to Filing Officer: | | | | | | |
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Office Use Only



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SECRETARY OF STATE
HASSET PLANTER

T. CLINE
DEC 14 2010
EXAMINER

COVER LETTER

| - | • | • | | | | |
|----------------------|--|--|---|------------------------|-----------------|-----------|
| TO: | Registration Section Division of Corpo | | E SUNS MANAGE | re LLC | | |
| | | _ | | ,, , | | |
| SUBJECT: - FIXESUBLE | | | | | | |
| | | Name of Limi | ted Liability Company | | | |
| The er | nclosed Articles of Ar | mendment and fee(s) are sub | omitted for filing. | | | |
| Please | return all correspond | lence concerning this matter | to the following: | | | |
| | | | John Catalano | | | |
| | | | Name of Person | | | |
| | | Fi | ve Suns Holdings LLC | | | |
| | | | Firm/Company | | | |
| | | 2937 | SW 27th Ave, Suite 20 | 01 | | |
| | | | Address | | _ | |
| | | | Miami, FL 33133 | | Zā iod Sēcii | waser, in |
| | | | City/State and Zip Code | | | |
| | | jmo | c@fiveguysmiami.com o be used for future annual report | notification) | SS 5 | 1 |
| | | E-man address: (i | o be used for future annual report | nonneation) | | |
| For fu | rther information con | cerning this matter, please c | all: | | | P & HeX |
| | John | Catalano | at (305) | 401-6904 | | |
| | Name of P | erson · | Area Code & D | aytime Telephone Numbe | r | |
| | | | | | | |
| Enclos | sed is a check for the | following amount: | | | | |
| \$25 | 5.00 Filing Fee [| \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enc | losed) Certified | ite of Status & | ed) |
| | | | | | | |

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

| FIVE SUNS I | MANAGERS LLC | D | , | | | |
|---|--|----------------------------|--------------------------|--------------------|--|--|
| (<u>Name of the Limited Liability Con</u> (A Florida Limit | npany as it now appears ed Liability Company) | on our records. |) | | | |
| The Articles of Organization for this Limited Liability Comp | any were filed on | 12/5/2008 | { | and assig | d assigned | |
| Florida document number L08000111724 | | | | | | |
| 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 end with the words "I" "L.L.C." | Limited Liability Compan | y," the designation | n "LLC" | or the ab | breviation | |
| Enter new principal offices address, if applicable: | 2937 SW 27th | Ave | | | | |
| (Principal office address MUST BE A STREET ADDRESS | Suite 201 | | ₹SE | | | |
| | Miami, Florida | 33133 | AH. | R | | |
| | | | | $\frac{1}{\omega}$ | MATARA MA | |
| Enter new mailing address, if applicable: | no change | | - 首 -4 | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | *************************************** | | TI (a | | 147 #1 4 1-1-1-1 | |
| | | | 700 | | | |
| | | | Yes | | | |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address | | ır records, <u>ent</u> | er the n | ame of | the new | |
| Name of New Registered Agent: no change | je | | | | · · · · · · · · · · · · · · · · · · · | |
| New Registered Office Address: | Fret | er Florida street | addrass | | | |
| | Line | ar Tioriuu sireei | <i>иии</i> / <i>с</i> 33 | | | |
| | City | , Florida City Zip Code | | | | |
| Naw Pagistawad Agant's Signatura if shanging Dagistawad Ag | • | | Z.I. | р Соце | | |

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 Changing Registered Agent, Signature of New Registered Agent

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> <u>Address</u> Type of Action no change ☐ Add Remove Remove ☐ Add Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 1 Dated Signature of a member or authorized representative of a member

John Catalano, Managing Member of Five Suns Holdings LLC, its sole member

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00