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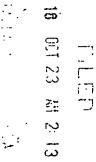
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COVER LETTER

	Registration Se Division of Cor			
eun ir c	SUNSHINI	E PONTOON RENTALS OF E	DESTIN, LLC	
SOBJEC	Tr:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	•	
ricase re	um ali correspo	JOHN R. DOWD, JR., ES	-	
·		DOWD LAW FIRM, P. A.	Name of Person	
		25 BEAL PARKWAY, SU	Firm/Company JITE 230	
		FORT WALTON BEACH	Address , FLORIDA 32548	
		sunshinepontoons@gmail.c	City/State and Zip Code	,,
For furth	er information c	E-mail address: (oncerning this matter, please co	to be used for future annual report notif all:	leation)
JOHN R.	. DOWD, JR., E	SQ.	850 650-2202	
	Name o	f Person	Area Code Daytime	· Telephone Number
Enclosed	is a check for th	ic following amount:		
\$25.0	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 OF

SUNSHINE PONTOON RENTAL	· · · · · · · · · · · · · · · · · · ·	
(Name of the Limi	ited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited 1 lorida document number L09000066887		Y 10, 2009 and assigned
his amendment is submitted to amend the fol	lowing:	
. If amending name, <u>enter the new name o</u>	of the limited liability company he	<u>re</u> :
ne new name mus: be distinguishable and contain the	words "Limited Liability Company," the de	esignation "LLC" or the abbreviation "LL.C."
tter new principal offices address, if appli	cable:	3 :
rincipal office address MUST BE A STRE	ET ADDRESS)	23 73
nter new mailing address, if applicable: <u>Iailing address MAY BE A POST OFFICE</u>		
If amending the registered agent and gistered agent and/or the new registered of	d/or registered office address on office address here:	our records, enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:	25 Beal Parkway, Suite 230	do that address
		da street address
	Fort Walton Beach	, Florida 32548
	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.

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

Title	Name	<u>Address</u>	Type of Action
MGRM	ED ROGUES	415 MOUNTAIN DRIVE, DESTIN, FLORIDA 32541	□ Add
			B766
			Remove
			□ Change
MGRM	BARBARA MIZELL Bandane My Jan	415 MOUNTAIN DRIVE DESTIN, FLORIDA 32541	
			■ Remove
			□ Change
AMGR	SUNSHINE DESTIN, INC.	415 MOUNTAIN DRIVE DESTIN, FLORIDA 32541	⊒ Addi چې
			Remove
			Change
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ective date, if other to effective date is listed, the term of the date inserted ument's effective date	e date must be speci in this block does	fic and cannot b not meet the	e prior to date of applicable statu	tory filing requir-	ements, this da	ng.) Pursuant to 605.02
record specifies a he 90th day after	the record is f	ive date, bi iled.	ut not an eff	ective time, a	t 12:01 a.n	1. on the earlier
OCTOBER ed	(,)	2018				
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	Statistis.	ot a member o	er authorized rem	esentative of a mer	cher	

Page 3 of 3

Filing Fee: \$25.00