Division of Corporations Electronic Filing Cover Sheet

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(((H09000244485 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : PAUL M. BLOOMGARDEN,

Account Number: I20010000022

Phone

: (954)370-2222

Fax Number : (954)370-2211

**Enter the email address for this business entity to be used for futu annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUN MAILING AND ADVERTISING, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

NOV 20 2009

Registration Section

21

TO:

H09000244485 3 COVER LETTER

Divísion of Co	orporations	
SUBJECT:	SUN MAILING A	ND ADVERTISING, LLC
JOBJEC 1		nited Liability Company
The enclosed Articles of	of Amendment and fee(s) are su	abmitted for filing.
Please return all corresp	pondence concerning this matte	er to the following:
	H	IORACIO SOSA, ESQ.
	Name of Person	
	BLOOMGARI	DEN, GOUDREAU & ROSEN, P.A.
	Firm/Company	
	0554 144	OLINIDIOE DI VO. CUITE DOS
•	8551 VV	SUNRISE BLVD, SUITE 208 Address
	City/State and Zip Code COSA@LAWBGR.COM (to be used for future annual report notification) CITY/State and Zip Code AND TOTAL TOTA	
	City/State and Zip Code	
	HS	SOSA@LAWBGR.COM
	E-mail address: (نعلان مي لنظ
For further information	concerning this matter, please of	call:
HORA	CIO SOSA, ESQ.	054 270 2222 95
Name	of Person	at (994) STO-2222 Area Code & Daytime Telephone Number
Enclosed is a check for	the following amount:	
∑ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy 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

H09000244485 3

H09000244485 3 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUN MAILING	AND ADVERTIS	SING, LLC		_	
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now an Limited Liability Compa	nears on our records ny)	<u>i.</u>)		
The Articles of Organization for this Limited Liability	Company were filed on	OCTOBER,12	,2009 and	l assigne	ed
Florida document numberL0900098525	<u></u> .	•			
This amendment is submitted to amend the following:	•				
A. If amending name, enter the new name of the lin	nited liability company	here:			
The new name must be distinguishable and end with the wo	ords "Limited Liability Co	mpany," the designati	ion "LLC" or	the abbro	
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADD.	RESS)			re	
	1		P.S.	\$907	
			놀ੜ	ACP	- 1
Enter new mailing address, if applicable:			AST		7 mins
(Mailing address MAY BE A POST OFFICE BOX)				9	7-7 m2.
			11		د د دسم ر
			DR OR	Ċ	-
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		on our records, <u>en</u>		ie of th	е псч
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
, Florida					
	City		Zip C	ode	

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

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

<u>Title</u>	Name	Address	Type of Action				
MGRM	CROES, CARLOS	C/O 8551 W. SUNRISE BLVD, SUITE 208 FORT LAUDERDALE, FL 33322	Add Remove				
<u>MGRM</u>	CROES, CARLA	C/O 8551 W. SUNRISE BLVD, SUITE 208. FORT LAUDERDALE, FL 33322	_√ Add ☐ Remove				
			Add Remove				
			Add Remove 				
•			Add 2000 NOV				
D. If amending	g any other information, enter change(s)		Add 99 AM 89 29				
-			- -				
			-				
Dated	NOVEMBER 19 2009	authorized replesentative of a member					
	VERON	IICA HERRERA	· 				
Typed or printed name of signee							

Page 2 of 2

Filing Fee: \$25.00