

(Req	uestor's Name)			
•				
(Add	ress)			
(Address)				
(City/	/State/Zip/Phone	⇒#)		
PICK-UP	■ WAIT	MAIL		
(D)	F-M N			
(Busi	ness Entity Nan	nej		
(Doc	ument Number)			
Certified Copies	Certificates	s of Status		
•				
Special Instructions to Fi	ling Officer			
Opeoidi mondellorio to i i	mig Omoci.			

Office Use Only



900188251429

12/01/10--01019--033 **25.00

10 DEC 13 PH 4: 58

B. BOSTICK

DEC 1 4 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SUNCOAST SUN CONTROL LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
DAVID R. DICKENS Name of Person	
Firm/Company	
5616 18th AVENUE EAST	
BRADENTON FL 34208 AND SECOND STATE OF THE SECOND S	
DRDIOL @ MSN. COM	7
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	-
DAVID R. DICKENS at 941 232-4942 Pro Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ S25.00 Filing Fee &	
·	

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

SUNCOAST	SUN	CONTROL	_ LLC
(<u>Name of the Limited Liability</u> (A Florida Li	Company as it no mited Liability Co	ow appears on our records.) ompany)	
The Articles of Organization for this Limited Liability Co Florida document number L/OOOO 119	mpany were filed	don February 1,2 (2/1/2010	DID and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability com	pany here:	
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liabili	ty Company," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			77
(Principal office address MUST BE A STREET ADDRE	<u></u>		EG 6
			SSE TO THE
Enter new mailing address, if applicable:	A		
(Mailing address MAY BE A POST OFFICE BOX)			
			58 NIE NIDA
B. If amending the registered agent and/or registe		ess on our records, enter	the name of the new
registered agent and/or the new registered office addre	ess nere:		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
•		, Florida	
	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 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>	Name	Address	Type of Action
MGRM .	DAVID R. DICKE	NS 5616 18th AV 1 BRADENTON FT 34200	Add Remove
			Add Remove
	·		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendia	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	TALLAHASSE
Dated D	ECEMBER 7, 201		5 -
	Signature of a member of	or authorized representative of a member	
<u>-</u>	DAVID R.	r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00



December 2, 2010

DAVID R. DICKENS SUNCOAST SUN CONTROL LLC 5616 18 AVENUE EAST BRADENTON, FL 34208

SUBJECT: SUNCOAST SUN CONTROL LLC

Ref. Number: L10000011999

We have received your document for SUNCOAST SUN CONTROL LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 310A00028042

