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SECRETARY OF STATE
NIT AHASSEF, FLORID.

B. BOSTICK

JAN -4 2011

EXAMINER

COVER LETTER

то:	Registration Se Division of Cor						
SUBJE	ECT:	SUNN	Y PLAZA LLC				
		Name of Lim	ited Liability Company		•		
The end	closed Articles of .	Amendment and fee(s) are su	bmitted for filing.				
Please	return all correspo	ndence concerning this matte	r to the following:				
			MONICA MAYER		_		
			Name of Person				
	MACHO & ASOCIADOS LLC Firm/Company		_				
		1110 E	BRICKELL AVE, SUIT	E 800			
			Address		- As		
	MIAMI, FL 33131		E A	O DEC	AND - China		
			City/State and Zip Code		HAS	EC 30	5 PARTIES AND ADDRESS OF THE PARTIES AND ADDRESS
			YER@UHY-MACHO. (to be used for future annual rep		338 338		
For furt	ther information co	oncerning this matter, please	call:		F STAT	PH 2:4	المستدادة
	МОМ	IICA MAYER	at (954)	937-5843	IDA	Š	
	Name of	`Person	Area Code &	z Daytime Telephone Numb	er		
Enclose	ed is a check for th	e following amount:					
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	nclosed) Certifie	iling Fee, cate of Stated Copy onal copy is		sed)
	Registra Divisior P.O. Bo	NG ADDRESS: ation Section of Corporations x 6327 ssee, FL 32314	Registration Division of Clifton Bui	Corporations			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNNY PL	AZA, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appea Liability Company)	rs on our records.	
The Articles of Organization for this Limited Liability Company	were filed on	08/06/2010	and assigned
Florida document number L10000082605			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Lim" L.L.C."	ited Liability Comp	any," the designation "L	.LC" or the abbreviation
Enter new principal offices address, if applicable:	cipal offices address, if applicable: 1110 BRICKELL AVENUE, SUITE 800		
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 3	3131	
Enter new mailing address, if applicable:	1110 BRICK	ELL AVENUE, SU	ITE 800
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33131		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	view.	nter Florida street addi	
	En	ress	
	City	, Florida	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	CAMPORINO, JOSE LUIS	2450 NE MIAMI GARDENS DRIVE. SECOND FLOOR. MIAMI, FL 33180	Add Remove
MGR_	CAMPORINO, JOSE LUIS	2450 NE MIAMI GARDENS DRIVE. SECOND FLOOR. MIAMI, FL 33180	✓ Add ☐ Remove
	• 		Add Remove
			Add Remove
			Add Remove
		-	Add Remove
D. If amend	ling any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
		TALL AHA	10 DEC
_		SSEE, FL	-30 F
Dated	DECEMBER 01, 20	leus Cocahines	2+2 5: +2
	- *	or authorized representative of a member	
		LUIS CAMPORINO or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00