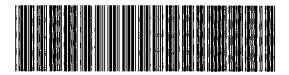
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EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp		r T		
SUBJECT:	SUNSHI	NE #7155, LLC		
		ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	bmitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
		Name of Person		
	P			
		Firm/Company		
	100 S.			
		Address		
	TA	TAMPA, FLORIDA 33602		
		City/State and Zip Code	2010 NOV -C	
	E-mail address: (to be used for future annual report notification)		
For further information co	oncerning this matter, please of	call:	10-6 00 1	
ABE	BY B. BAYA	at (813) 472-77	751	
Name of	Person	Area Code & Daytime Telephot	751 PA ST	
Enclosed is a check for th	e following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & S Certified Copy (additional copy is enclosed)	660.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	NG ADDRESS:	STREET/COURIER ADD Registration Section	DRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUN	SHINE #7155, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)		
The Articles of Organization for this Limited Liability	y Company were filed on SEPTEMBER 23, 2010 and assigned		
Florida document numberL10000099722	.		
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	imited liability company here:		
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD			
	A HOUSE TO		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	Ext.		
B. If amending the registered agent and/or reg	gistered office address on our records, enter the name of the new		
registered agent and/or the new registered office a	ddress here:		
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>	<u>Name</u>	Address	Type of Action
MGRM	P. ALBERT BIENVENU IV	3838 N. CAUSEWAY BLVD, STE 202 METAIRIE, LA 70002 US	20 ☐ Add
MGRM_	Sunshine Acquisition	Sunshine Acquisition Group, LLC 3838 N. CAUSWAY BLVD, STE 2020 METAIRIE, LA 7002 US	✓ Add Control
	Group, LLC	0	Add Remove
			Add Remove
	,		Add Add A F Rendere
			V-9 F
D. If amend	ling any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	Remove ST.
_			
Dated	November 8 20	010	
Dated	Ille	Bayr	
	· ·	r or authorized representative of a member	
	ABBY E	3. Bayou or printed warme of signee	·
	Typed	or printed wame of signee	

Page 2 of 2

Filing Fee: \$25.00