

#L10000122580

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DIVISION OF CORPORATIONS

SENATOR LAW CENTER

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : LAW OFFICES OF STEINBERG & ASSOCIATES, P.A.
Account Number : I19980000080
Phone : (305)538-2344
Fax Number : (305)538-0419

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

Email Address: mark@alhadefflaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SUNSHINE STATE PARKING, LLC

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SUNSHINE STATE PARKING, 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:

Mark Alhadeff

Name of Person

The Alhadeff Law Group

Firm/Company

767 Arthur Godfrey Road

Address

Miami Beach, FL 33140

City/State and Zip Code

mark@alhadefflaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Alhadeff

Name of Person

at (305)

538-2344

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
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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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
12 SEP 14 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUNSHINE STATE PARKING, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/28/2010 and assigned Florida document number L10000122580.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 767 Arthur Godfrey Road
Miami Beach, FL 33140
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 767 Arthur Godfrey Road
Miami Beach, FL 33140
(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address 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

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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>	<u>Address</u>	<u>Type of Action</u>
MGRM	ANDREW MIRMELLI	1210 Michigan Avenue Miami Beach, FL 33139	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 9/13/2012


 Signature of a member or authorized representative of a member
Mark Altschul
 Typed or printed name of signee