Division of Corporations Electronic Filing Cover Sheet

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ror:

Division of Corporations

Fax Number : (850)617-6383

From:

: LAW OFFICES OF STEINBERG & ASSOCIATES, P.A. Account Name

Account Number : I19980000080 1 (305) 538-2344 Phone 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. **

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

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SENATOR LAW CENTER

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		COVER LETTER		
TO: Registration S Division of Co				
SUBJECT:	SUNSHINE ST	TATE PARKING, LLC		
	Name of Limi	ited Liability Company		
The enclosed Articles of	f Amendment and fec(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
Mark Alhadeff				
	•	Name of Person		
	Th	e Alhadeff Law Group		
		Firm/Company		
	76	7 Arthur Godfrey Road		
Address				
Miami Beach, FL 33140				
		City/State and Zip Code		
	ma Family address (ark@alhadefflaw.com to be used for future annual report notificat		
For further information	concerning this matter, please c		ion)	
Mark Alhadeff		at (305) 53	8-2344	
Name	of Person	Area Code & Daytime Te	elephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, 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

3055380419

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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 STAT (Name of the Limited Liability Compa (A Florida Limited I	E PARKING, I ny as it now appears lability Company)	LC	3
The Articles of Organization for this Limited Liability Company Florida document numberL10000122580	were filed on	11/2 6 /2010	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here	:	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Compan	y," the designation "Ll	.C" or the abbreviation
Enter new principal offices address, if applicable:	767 Arthur Godfrey Road		
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33140		
Enter new mailing address, if applicable:	767 Arthur Go	dfrey Road	
(Mailing address MAY BE A POST OFFICE BOX)	Miami Beach, FL 33140		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address:	<u>e:</u> Ente	er records, <u>enter th</u> er Florida street addre	995
	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 or Managin	the Managers or Managing Memb Member being added or removed	oers on our records, <u>enter the title, name, and add</u> from our records:	dress of each Manager
MGR = Ma			
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	ANTREW MIRMELLI	1210 Michigan Antenue Miami Reach FL 33139	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter ch	range(s) bere: (Attach additional sheets, if necessar)	v.) - -
	alist	2012.	 _
Dated		MA MA	
	Signature of a mer	mber or authorized representative of a member Mar R Allique eff	

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Filing Fee: \$25.00

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