

#211000000527

10/16/2014 13:09 9543891397

SALVER AND COOK

PAGE 01/01

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000242657 3)))



H140002426573ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6363

From:
Account Name : PAUL SALVER, P.A.
Account Number : I20020000087
Phone : (954) 389-1333
Fax Number : (954) 389-1397

FILED
2014 OCT 16 AM 8:01
CLERK OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

RECEIVED

14 OCT 16 PM 12:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SUNRISE DADELAND LLC.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$30.00

Electronic Filing Menu

Corporate Filing Menu

K. SALY
EXAMINER
Help OCT 17 2014

FILED

2014 OCT 16 AM 8:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF****SUNRISE DADELAND, 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 1/3/11 and assigned
Florida document number L11000000527.

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:

2853 EXECUTIVE PARK DRIVE

(Principal office address MUST BE A STREET ADDRESS)

SUITE 202WESTON, FL 33331

Enter new mailing address, if applicable:

2853 EXECUTIVE PARK DRIVE

(Mailing address MAY BE A POST OFFICE BOX)

SUITE 2001WESTON, FL 33331**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:

PAUL SALVER, PA

New Registered Office Address:

2721 EXECUTIVE PARK DRIVE, SUITE 3

Enter Florida street address

WESTON

City

Florida 33331

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	SUNRISE CRG, LLC	11890 SW 8TH ST.	<input type="checkbox"/> Add
		SUITE 202	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33184	
MGRM	CERUTTI, CARLOS	2469 SW 156 COURT	<input type="checkbox"/> Add
		MIAMI, FL 33185	<input checked="" type="checkbox"/> Remove
MGRM	CARRILLO, JESUS	11890 SW 8TH ST.	<input type="checkbox"/> Add
		SUITE 202	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33184	
AmBR	CHOCK Y. HUNG	2853 EXECUTIVE PARK DRIVE	<input checked="" type="checkbox"/> Add
		SUITE 202	<input type="checkbox"/> Remove
		WESTON, FL 33331	
AmBR	MINYI LING DE HUNG	2853 EXECUTIVE PARK DRIVE	<input checked="" type="checkbox"/> Add
		SUITE 202	<input type="checkbox"/> Remove
		WESTON, FL 33331	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

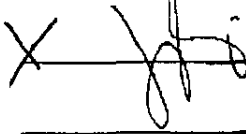
2014 OCT 16 AM 8:01
FILED
MILWAUKEE, WISCONSIN
U.S. DISTRICT COURT
EASTERN DISTRICT OF WISCONSIN

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

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

X Oct 16 2014

X 

Signature of a member or authorized representative of a member

CHOCK Y. HUNG

Typed or printed name of signee

FILED
2014 OCT 16 AM 8:01
CLERK OF STATE
TALLAHASSEE, FLORIDA