## 111000003531

(Fi	Requestor's Name)	
(A)	Address)	
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DIVISION OF CORPORATIONS
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## COVER LETTER

		tration Section of Corpo				
erin rez		UNRISE M	ANAGEMENT PARTNERS	LLC		
SUBJEC	-1; <u>-</u>		Name of Limi	ted Liability Company		
The encl	osed A	Articles of A	mendment and fee(s) are subr	mitted for filing.		
Please re	turn a	II correspond	lence concerning this matter t	o the following:		
				JOHN A. CERUTTI		
				Name of Person		
			SUNRISE N	MANAGEMENT PARTN	SERS LLC	
				Firm/Company		<del></del>
			833	33 NW 53rd Street Suite 5	504	
				Address		
				Doral, FL 33166		
				City/State and Zip Code		<del></del>
				us@mindbooksolutions.c		
				o be used for future annual re	eport notification)	
For furth	er info	ormation con	cerning this matter, please ca	II:		
	J(	OHN A. CEI	_	786 at ()	414-1370  Daytime Telephone	
		Name of I	erson	Area Code	Daytime Telephone	Number
Enclosed	l is a c	heck for the	following amount:			
<b>□</b> \$25.0	00 Fili	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	osed) (	50.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	E MANAGEMENT PARTNERS		
(Name of the Limited	I Liability Company as it now appe A Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Lia Florida document numberL11000003531	bility Company were filed on _	01/10/2011	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	the limited liability company	<u>here</u> ;	
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:		<u> </u>
(Principal office address MUST BE A STREET	ADDRESS)		D VISIO
Enter new mailing address, if applicable:			FILE HOF CO
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>		AM 8: 0
B. If amending the registered agent and/o registered agent and/or the new registered offi		on our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Fi	orida street address	
		Florida _	
	City		Zıp 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	JOHN A. CERUTTI	2469 SW 156TH COURT	
		MIAMI FL 33185	Remove
			☐ Change
MGR	SUNRISE PIZZA LLC	8333 NW 53RD, STREET	Add
		SUITE 504	□ Remove
		DORAL FL 33166	□ Change
			☐ Remove
			Change
			□ Remove
			Change
			Add
			Remove
			☐ Change
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			☐ Remove
			□ Change

SUNRISE PIZZA LLC		
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e: If the date inserted in this bloc	ate of filing:  be specific and cannot be prior to date of filing or more that k does not meet the applicable statutory filing requartment of State's records.	irements, this date will not be listed
record specifies a delayed one of the record specifies and the record re	effective date, but not an effective time, of is filed.	at 12:01 a.m. on the earlier
MAY 22ND	2018	
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	gnature of a member or authorized representative of a m	Tark.

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Filing Fee: \$25.00