L11000026650

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B. BOSTICK APR 2 1 2011

EXAMINED

COVER LETTER

	egistration Seivision of Co			•		
SUBJECT	: <u>~A11</u>	about	Sunshin	e Services, LL I Liability Company	_	
			Name of Limited	l Liability Company		
The enclose	ed Articles of	`Amendment and	I fee(s) are subm	itted for filing.		
Please retur	rn all correspo	ondence concern	ing this matter to	the following:		
		_A	manda	Love //		-
				Firm/Company		_
				, ,		
		160	1 NW	79th Terrace	<u> </u>	
		Mo	arga le,	FL 33063		<u> </u>
			(100	FL 33063 City/State and Zip Code X @ A01. COM be used for future annual report notifi		11 APR 20
		<i>F11</i>	nc 933, mail address: (to b	X W AOI. COM ne used for future annual report notifi	ication)	FR 20
For further	information of	concerning this n			·	AT 17th American
<u>Hm</u>	<u>anda</u>	Lovely		at (<u>954)</u> 864-88 Area Code & Daytime	80	
	Name o	of Person /		Area Code & Daytime	e Telephone Numb	ଖି
Enclosed is	a check for t	he following am	ount:			
□\$ 25.00 1	Filing Fee	\$30.00 Fili Certifica	ng Fee & te of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Certific Certific	filing Fee, cate of Status & ed Copy onal 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

All about suns	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability	Company were filed on $3/3/11$ and assigned
Florida document number <u>L 1/0000 26650</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
N/A	vords "Limited Liability Company," the designation "LLC" or the abbreviation
The new name must be distinguishable and end with the w "L.L.C."	vords "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADI	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	RIE 07
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	sistered office address on our records, <u>enter the name of the new</u> ddress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
•	, Florida
	City Zin 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Title Title <u>Address</u> **Type of Action** Name | Amanda Love MGRM Remove ☐ Add Remove Remove Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary); Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00