#1 11000057088

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K.SALY EXAMINER MAY 3 1 2011

COVER LETTER

TO:	Registration Sect Division of Corpo				
SURII	ECT:	SUNWAY	PROJECT LLC		
		Name of Lim	ited Liability Company		
The en	closed Articles of A	mendment and fee(s) are sul	bmitted for filing.		
Please	return all correspond	lence concerning this matter	r to the following:		
		LEC	ONARDO JOSE SZTE	EIN	
			Name of Person		
SUNWAY PROJE				.C	
			Firm/Company		
			5016 SW 141ST AVE		
			Address		·
			MIRAMAR FL. 33027		
			City/State and Zip Code		···········
		JOSES E-mail address: (SZTEIN@HOTMAIL.(to be used for future annual rep	ort notification)	
For fur	ther information con	cerning this matter, please c	eall:		
		O JOSE SZTEIN	at (_305_)	450 50	
	Name of P	erson	Area Code &	Daytime Telepho	ne Number
Enclose	ed 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 en		660.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MAILIN	G ADDRESS:	STREET/O	COURIER ADD	PRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

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

FILED	
IIMAY 27 PM	^
SEUNLIANY OF ST S.) CHIASSEE, FLO	ATE

SUN	WAY PROJECT LLC	ξε([A] j	AHASSEE, FLORID.
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears da Limited Liability Company)	on our records.)	TYPASSEE, FLORIDA
The Articles of Organization for this Limited Liability Florida document numberL11000057088	· · ·	05/13/2011	and assigned
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company here	:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compar	y," the designation "l	LLC" or the abbreviation
Enter new principal offices address, if applicable:			· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET AL	ODRESS)		
	·		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	2		
			
B. If amending the registered agent and/or re registered agent and/or the new registered office a		ır records, <u>enter (</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	er Florida street ada	iress
_	City	, Florida	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

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>	Address	Type of Action
MGRM	LAURA N SANCHEZ	5016 SW 141ST AVE MIRAMAR FL 33027	Add
			Add Remove
			Add Remove
			Add Remove
	:		Add Remove
			Add Remove
D. If amend	ing any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary	<i>)</i>
			<u> </u>
Dated	Tox Shills		
	V_{LEO}	ther or authorized representative of a member NARDO JOSE SZTEIN peed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00