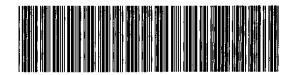
L11000088153

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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ZOII SEP 12 PM 2: 37
SECRETARY OF STATE

C. LEWIS

SEP 1 3 2011

EXAMINER

COVER LETTER

TO: Registration S Division of Co						
SUBJECT:	SUN KE	Y REALTY, LLC				
		nited Liability Company				
The enclosed Articles of	of Amendment and fee(s) are su	abmitted for filing.				
Please return all corresp	oondence concerning this matte	er to the following:				
		Giselle Del Amo				
Name of Person						
Infante Zumpano						
Firm/Company						
500 S Dixie Highway, Suite 302						
		Address				
Coral Gables, FL 33146						
		City/State and Zip Code				
	giselle.ortizdelamo@infantezumpano.com E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please	•				
Gis	selle Del Amo	at (_ 305_)_	503-2990			
Name of Person			Daytime Telephone 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 en	\$60.00 Filing Fee Certificate of St Certified Copy (additional copy	atus &		

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**

SUN KEY REALTY, LLC

FILED

2011 SEP 12 PH 2: 37

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(<u>Name of the Limited Liability</u> (A Florida l	y Company as it now appear Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability C Florida document numberL11000088153	Company were filed on	8/1/2011	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ited liability company here	⊵:	
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Compar	ny," the designation "I	LLC" or the abbreviation
Enter new principal offices address, if applicable:	·		
(Principal office address MUST BE A STREET ADDR	RESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registoregistered agent and/or the new registered office addr	ered office address on or ress here:	ur records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	: Ente	er Florida street addi	ress "
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered	l 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

Type of Action <u>Title</u> <u>Name</u> **Address** MGR Guillermo Carrillo 1172 SOUTH DIXIE HIGHWAY ✓ Add Remove SUITE 537 CORAL GABLES FL 33146 ☐ Add Remove Remove Add Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated September 2011 Signature of a member or authorized representati Typed or printed name of signee CARLOS

Page 2 of 2

Filing Fee: \$25.00