## 111000111049

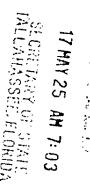
(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
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MAY 25 2017

J SHIVERS

## **COVER LETTER**

Div	ision of Corp	orations			
SUBJECT:	SUNSHINE	INVEST LLC			
<b>_</b>		Name of Limit	ed Liability Company		,
The enclosed	Articles of A	mendment and fee(s) are subm	nitted for filing.		
Please return	all correspon	dence concerning this matter to	the following:		
		LINDA VOTRUBOVA			
			Name of Person		<del>.</del>
		SUNSHINE INVESTILLC			
			Firm/Company		
		8824 17th ave cir nw			
			Address		<del></del>
		Bradenton, Fl, 34209			
			City/State and Zip Code	, <del></del>	
		linda.votrubova@icloud.com			
		E-mail address: (to	be used for future annual	report notification)	
For further in	iformation coi	ncerning this matter, please cal	l:		
Linda Votrul	oova		94 at ( )	18403188	
_	Name of l	Person	Area Code	Daytime Telepho	ne Number
Enclosed is a	check for the	following amount:			
<b>■</b> \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

**Registration Section** 

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

SUNSHINE INVEST LLC						
( <u>Name of the Limited Liab</u> (A Flori	pility Company as ida Limited Liabili	it now appears ty Company)	on our records.)		_	
The Articles of Organization for this Limited Liability Florida document number L11000111049	Company were	e filed on	19/28/2011	and	l assign	ed
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lin	mited liability	company her	<u>e</u> :			
The new name must be distinguishable and contain the words "L	imited Liability Co	ompany," the des	ignation "LLC" or the	abbreviation	ı "L.L.C	1 27
Enter new principal offices address, if applicable:						<del></del>
(Principal office address MUST BE A STREET ADD	DRESS)					
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	_					
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		address on	our records, <u>ente</u>	er the nar	ne of	the nev
Name of New Registered Agent:					<u> </u>	<u> </u>
New Registered Office Address:				%    }  }  }	55	r solv Gran
		Enter Floria	la street address	139	ÁM 7	1 1
<del></del>		City	, Florida _	= Zip C	<u></u>	<del></del>

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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Helena Votrubova	8824 17th ave cir nw, Bradenton, F	
			■ Remove
			☐ Change
AMBR	Martin Votruba	459 Walls Way, Osprey, Fl, 34229	Add
			□ Remove
			Change
			□ Add
			Remove
			Change
			Add
			□ Remove
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7/1-20	MAY 2
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00