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12 SEP 17 PH 4: 40

B. BOSTICK
SEP 18 2012
EXAMINER

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Co	orporations		
SUBJECT:	SUNRISE PE	ETRO HOLDING LLC	
	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	ubmitted for filing.	
Please return all corresp	oondence concerning this matte	er to the following:	
		MAHAMUNIR JAFRI	
		Name of Person	
	SUNR	RISE PETRO HOLDING LLC	
		Firm/Company	
	172	240 NORTHWAY CIRCLE	{
		Address	
	Bo	OCA RATON, FL 33496	12 SEP 17 PH 4:41
		City/State and Zip Code	
		mrjafri@hotmail.com	p
	E-mail address:	(to be used for future annual report notification)	
For further information	concerning this matter, please	call:	
	IAMUNIR JAFRI	at (561) 756-5987	
Name	of Person	Area Code & Daytime Telephone N	lumber
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee & \$60.	00 Filing Fee,
	Certificate of Status	Certified Copy. Ce	rtificate of Status &
			rtified Copy Iditional copy is enclosed)
	LING ADDRESS:	STREET/COURIER ADDRE	ess:
		Registration Section Division of Corporations	
P.O. Box 6327 Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		O HOLDING		-	_	
(Name of the Limite	A Florida Limited	Liability Company)	rs on our recorus.			
The Articles of Organization for this Limited Florida document number L1200010		y were filed on	08/14/2012	and	assigned	l
Florida document number L1200010						
This amendment is submitted to amend the fo	llowing:					
A. If amending name, enter the new name	of the limited lia	bility company hei	<u>re</u> :			
	N//		_			
The new name must be distinguishable and end v "L.L.C."	vith the words "Lim	nited Liability Compa	any," the designation "	LLC" or t	he abbrev	iation
Enter new principal offices address, if appl	icable:	N/A				
(Principal office address MUST BE A STRE	ET ADDRESS)	*		<u>.</u>	<u> 153</u>	
					SE	62
					-	23 40
Enter new mailing address, if applicable:		N/A			7	,
(Mailing address MAY BE A POST OFFICE BOX)				73.1	Ž	,,
				13.		
B. If amending the registered agent and registered agent and/or the new registered			our records, enter	the nam	e of the	new
Together and of the new registered	onec address ne	<u> </u>				
Name of New Registered Agent:	N/A					
New Registered Office Address:	<u>N/A</u>					
		En	ter Florida street add	dress		
			, Florida	,		
		City		Zin C	ode.	

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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Brian Enterprises LLC	124 Olde Manor Lane Moon, PA 15108	Add ☐ Remove
MGRM_	Anjoi Enterprises LLC	124 Olde Manor Lane Moon, PA 15108	Add ✓ Remove
			Add Remove
D. If amen	nding any other information, enter cl	hange(s) here: (Attach additional sheets, if necessary.) .	12 SEP I
<u> </u>			P 17 PH 4:
Dated	SEPTEMBER 12	2012.	
		ember or authorized representative of a member	
	MARSZ PROF	PERTIES LLC (MAHAMUNIR JAFRI)	

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00