L12000115294

(Re	questor's Name)	
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12 SEP 14 PH 1: 21

SECRETARY OF STATE

COVER LETTER

	on Section f Corporations	(
SUBJECT:	SHUNSHINE INVE	ESTMENT REALTY L	LC
SUBJECT:		ed Liability Company	
The enclosed Article	les of Amendment and fee(s) are sub-	mitted for filing.	
Please return all co	rrespondence concerning this matter	to the following:	O
	ANI	THONY C. G. BROWN	TE SEP 14 PH 1: 21
		Name of Person	P
	SHUNSHIN	E INVESTMENTREALTY	LLC PH 1: 2
		Firm/Company	
	122	239 NW 35th STREET	27
		Address	
	COR	AL SPRINGS, FL 33065	
		City/State and Zip Code	
		WN8411@YAHOO.COM o be used for future annual report not	(lication)
For further informa	tion concerning this matter, please ca	·	·
۸	NTHONY BROWN	. 054	297-7587
	lame of Person	at (<u>954</u>) Area Code & Daytii	ne Telephone Number
Enclosed is a check	for the following amount:		
\$25.00 Filing F	ce \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R D P	AAILING ADDRESS: tegistration Section Division of Corporations .O. Box 6327 Callahassee, FL 32314	STREET/COUR Registration Sect Division of Corpo Clifton Building 2661 Executive C	orations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHUNSHINE	INVESTIMENT REAL	IT LLC	
(<u>Name of the Limited Liabi</u> (A Flori	lity Company as it now appea da Limited Liability Company)	rs on our records.)	<i>-</i>
The Articles of Organization for this Limited Liability			and assigned
•			一马蜀
Florida document numberL12000115294	·	•	
This amendment is submitted to amend the following			PH 1:2
A. If amending name, enter the new name of the l	imited liability company he	<u>re</u> :	- 7
SUNSHINE I	NVESTMENT REALTY	LLC	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	any," the designation "LI	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<u>,.</u> <u></u>		
	-	·	
·			
B. If amending the registered agent and/or registered agent and/or the new registered office a		our records, <u>enter th</u>	ne name of the nev
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:			
-	Er	nter Florida street addr	ess
		, Florida	
	City		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 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

<u> Citle</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
). If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
			_
			
Dated		·	_
	Signature of a membe	or authorized representative of a member Tor printed name of signee	

Page 2 of 2

Filing Fee: \$25.00