113000075364

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T. BROWN

COVER LETTER

TO: Registration So Division of Co			ndr se 15 0 No
CUD ICCT.	Tanner S	unshine, LLC 🚡	••• •
SUBJECT:	Name of Limit	ed Liability Company	*
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	N	lichael F. Horan	
		Name of Person	
	Tan	ner Sunshine, LLC	
		Firm/Company	
	770	Trinidad Ave SE	
		Address	
	Pal	m Bay, FL 32909	
		City/State and Zip Code	
		tannersunshine.com	
	E-mail address: (to	o be used for future annual report notificati	on)
For further information of	concerning this matter, please ca	all:	
Micha	el Horan	at (321) 480-7311	
Name (of Person	Area Code & Daytime Te	elephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	₩\$30.00 Filing Fee & Certificate of Status	☐\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

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

Tanner Sunshine, LLC

ARTICLI	ES OF AMENDMEN I	
	ТО	<i>p</i> .
ARTICLES	S OF ORGANIZATION	. "// _
	OF	3 NOVED
Tanner	Sunshine, L	LC TALLARIAN PH 1:25 our records.) AMASSIE, FISTATE
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on Limited Liability Company)	our records.
The Articles of Organization for this Limited Liability		y 23, 2013 and assigned 104
Florida document number <u>L13000075364</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the will.L.C."	ords "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	-	
(Principal office address MUST BE A STREET ADD	<u>PRESS)</u>	
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	100 Find 40	
B. If amending the registered agent and/or registered agent and/or the new registered office ad		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter I	Florida street address
	P1 100	, 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 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 Horan	770 Trinidad Ave SE	X
		Palm Bay, FL 32909	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Remove
_			Add

mending any o	ther information, enter change(s) here: (Attach additional sheets, if necessar
	October 24, 2013
	MIMOUN, MGRM
	Signature of a member or authorized representative of a member Michael Francis Horan, MGRM
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00