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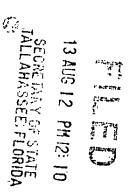
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COVER LETTER

TO: Registration Section **Division of Corporations**

nime and the second

Sand & Sun Ventures, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael H. Pursley

Name of Person

Firm/Company

543 Tiberon Cove Road

Address

Longwood, FL 32750

City/State and Zip Code

mpursley@cfl.rr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Pursley

at (614) 804-5207

Area Code & 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 enclosed) □\$60.00 Filing Certificate of Statu Certified Copy (additional copy

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

Sand & Sun Ventures, LL	3	
(Name of the Limiter	l Liability Company as it now appe A Florida Limited Liability Company	ars on our records.)
The Articles of Organization for this Limited I	iability Company were filed on <u>J</u>	uly 02, 2013 and assigned
Florida document number <u>L13000094411</u>	·	
This amendment is submitted to amend the fol	lowing:	
	•	
A. If amending name, enter the new name of	of the limited liability company h	ere:
The new name must be distinguishable and end w	ith the words "Limited Liability Com	nany" the designation "LLC" or the abbreviati
"L.L.C."	an all writes similar stating con	pany, and dealgranes. Life of the account.
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE		Fig
		≥ _m 3
		And S
Estance multipe address if applicables		CO Transmis
Enter new mailing address, if applicable:		(i) -<
(Mailing address MAY BE A POST OFFICE BOX)		105
B. If amending the registered agent and	or registered office address or	our records, enterShe name of the ne
registered agent and/or the new registered (office address here:	enterpare name of the ne
Name of New Registered Agent:	Michael H. Pursley	
New Registered Office Address:	543 Tiberon Cove Road	
		Enter Florida street address
	Longwood	, Florida 32750
	City	Zip Code
	Th. 1	

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

Page 1 of 3

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	ype of Action
MGRM	Jerry Brandon Gill	30936 Paradise Commons, 226	Add
		Fernandina Beach, FL 30234	Remove
MGRM	Michael H. Pursley	543 Tiberon Cove Road Longwood, FL 32750	Add Remove
			Add Remove
		JALLAHASSEI WHASSEI	Add Add
	·	TOROA	Regrove
			Add

). If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated	AUGUST 01 2013.
-	D-OV. Rethal C
	Signature of almember or authorized representative of a member
	DAVÍO W. RETHELFORD
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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SECRE MARY OF STATE
TALLAHASSEE, FLORIDA