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COVER LETTER

TO: Registration Section
Division of Corporations

_{cr.} Sunflower Sarasota Investment, 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:

Troy H. Myers, Jr.

Name of Person

Icard, Merrill, Cullis, Timm, Furen & Ginsburg, P.A.

Firm/Company

2033 Main St Ste 600

Address

Sarasota, FL 34237

City/State and Zip Code

tmyers@icardmerrill.com

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

For further information concerning this matter, please call:

Troy H. Myers, Jr.

,,941,,**953-811**

Name of Person

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 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 OF

SUNFLOWER SARASOTA				
(Name of the Limited (A	Liability Compa Florida Limited L	ny as it now appears on our liability Company)	records.)	- ``
The Articles of Organization for this Limited Lia	ability Company	were filed on August 6,	2013	and assigned
Florida document number <u>L13000110641</u>	·			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," the c	lesignation "LLC	or the abbreviation
Enter new principal offices address, if applica	ıble:	16 So Orange Ave		
(Principal office address MUST BE A STREE)	(ADDRESS)	Sarasota, FL 34236		
			Z _i	
				3 7
Enter new mailing address, if applicable:		16 So Orange Ave	پدره الآسر مر و در وو	P 1 At Le
(Mailing address MAY BE A POST OFFICE L	<u>30X)</u>	Sarasota, FL 34236		444
				√>
B. If amending the registered agent and/or registered agent and/or the new registered off			rds, <u>enter the</u>	name of the new
ogistered agent white the transfer of the tran		- "		
Name of New Registered Agent:	Stephen Pi	leggi		
New Registered Office Address:	16 So Orar	nge Ave		
		Enter Florid	da street addres	SS
	Sarasota		, Florida <u>342</u> :	36
		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, <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>	Name	Address	Type of Action
MGR	Stephen Pileggi	16 So Orange Ave, Sarasota, FL 3423	6 🗸 Add
			Remove
MGR	Troy H. Myers, Jr.	2033 Main St Ste 600, Sarasota, FL 3423	6 Add
			Remove
***************************************			Add
			Remove
			Add
			Remove
			Add Remove
			Add
			Remove

' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	ter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	
October 4th	2013 / /
	4/2
g)	Mar
_	a member or authorized representative of a member
Troy H. Myers, Jr.	1
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

