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EXAMINED

LAW OFFICE OF

ALBERT NAON JR., P.A.

DORAL I BUILDING 3785 NW 82 AVENUE • SUITE 107 MIAMI, FLORIDA 33166 TELEPHONE 305-577-9409 FACSIMILE 305-373-8159 ALNAONJR@AOL.COM

September 18, 2014

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re:

Mysun 2014 LLC

Articles of Amendment

Attention Registration Section:

Please file the enclosed Articles of Amendment to Articles of Organization of Mysun 2014 LLC, and update the company's public information accordingly. Attached is a check payable to the "Florida Department of State" in the amount of \$25.00 as the filing fee.

For further information concerning this matter, please call me at 305-577-9409.

Thank you for your attention to this matter.

Very truly yours,

ALBERT NAON JR., ESQ.

Enclosures

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia Florida document number L14000041044	bility Company	were filed on March	11, 2014 and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	, 11
The new name must be distinguishable and end with the w	ords "Limited Liab	ility Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	9737 NW 41 Str	eet, Suite 253 m
(Principal office address MUST BE A STREET		Doral, Florida 33	3178
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B		9737 NW 41 Str Doral, Florida 33	3178
B. If amending the registered agent and/or registered agent and/or the new registered off			records, enter the name of the new
Name of New Registered Agent:	Albert Naor	n Jr	
New Registered Office Address:	3785 N.W.	82 Avenue, Suite	
		Enter Florida str	eet address
	Doral		, Florida <u>33166</u>
		City	Zip Code
Now Degistered Agent's Signature if changing D.	wistanad Assaut.		

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> **Address Type of Action** ☐ Add ☐ Remove ☐ Add _____ Remove _____ □ Remove _□ Remove □ Remove

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
Effective	date, if other than the date of filing: (optional) the date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
	s document is filed by the Florida Department of State)
Dated	9-18-,2014.
	Signature of a member or authorized representative of a member
	Albert Naon Jr. as authorized representative
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00