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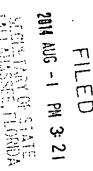
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M. Outligen AUG -1:2014

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

## SUN JUN ENTERPRISES LLC

SUBJECT:

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:

JUN SUN
Name of Person
Firm/Company
2367 TRADE CENTER WAY
Address
NAPLES, FL 34109
City/State and Zip Code
OSEPH@JALACCOUNTING.COM

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

For further information concerning this matter, please call:

JUN SUN

<sub>.,</sub>,954,963-6606

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) ুৱ

#### 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

FILED 2014 AUG -1 PM 3: 21

SUN JUN ENTERPRISES LLC

(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 Liability Company v	were filed on JULY 11, 2014 and assigned	
Florida document number L14000110145		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
N/A		_
The new name must be distinguishable and end with the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	N/A	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
B. If amending the registered agent and/or registered of		new
registered agent and/or the new registered office address here	•	
Name of Nam Pagistared Agents		
Name of New Registered Agent:	NI/A	
New Registered Office Address:	N/A Enter Florida street address	
	ismer i tortaa sireet aaaress	

#### 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>	<u>Address</u>	Type of Action
AMBR	IRIS SISSLER	2367 TRADE CENTER WAY	<b>′</b> □ Add
		NAPLES	■ Remove
		FL 34109	
· · · · · · · · · · · · · · · · · · ·			
			Remove
<u>.</u>			□ Add □ Remove
			<b></b>
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			Remove
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		<u> </u>	□ Add
			Remove
			□ Add
			□ Add

D.	If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
		· · · · · · · · · · · · · · · · · · ·
		N/A
E.		ctive date, if other than the date of filing:  (optional)  flective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after ate this document is filed by the Florida Department of State)
	Date	d JULY 25 2014
		@ JUN SUN
		Signature of a member or authorized representative of a member
		JUN SUN
		Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

