

L14000157268

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wrong form

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12/06/18--01022--019 **43.75

RECEIVED

DEC 06 2018

FILED
19 JAN -2 PM 4:00
TALLAHASSEE, FLORIDA

K SAI V

JAN 7 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 17, 2018

PLACE OF THE SUN, LLC
CANDIDA R PEREZ
10126 NW 41ST ST.
DORAL, FL 33178

SUBJECT: PLACE OF THE SUN, LLC
Ref. Number: L14000157268

We have received your document for PLACE OF THE SUN, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 018A00025793

2019 JAN -2 PM 12:00

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: PLACE OF THE SUN, 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:

CANDIDA R PEREZ R

Name of Person

PLACE OF THE SUN, LLC

Firm/Company

10126 NW 41ST ST

Address

DORAL, FL 33178

City/State and Zip Code

PLACEOFTHE SUN@YAHOO.COM

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

For further information concerning this matter, please call:

CANDIDA R PEREZ

786

343-3274

at ()

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

2019 JUN-2 PM 12:00

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

PLACE OF THE SUN, LLC

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

FILED
19 JAN -2 PM 4:00
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08-OCT-2014 and assigned
Florida document number L14000157268.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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

Enter new mailing address, if applicable: _____

Mailing address MAY BE A POST OFFICE BOX

If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida**

City

Zip Code

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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

FILED
19 JAN -2 PM 4:00
SUNSHINE STATE
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

COMPANY PURPOSE: PROJECT MANAGEMENT.

ART BUSINESS AND ALL OTHER LEGAL ACTIVITIES PERMITTED FOR LIMITED LIABILITY COMPANIES

FILED
19 JAN -2 PM 14:00
STATE OF NEW YORK

11/19/18

Effective date, if other than the date of filing: _____ (optional)

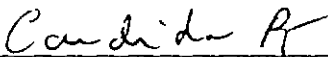
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

) The 90th day after the record is filed.

Dated 12/25/18



Signature of a member or authorized representative of a member

CANDIDA R PEREZ R

Typed or printed name of signee