

L14000185525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

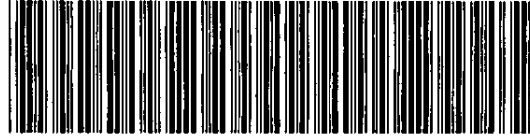
(Business Entity Name)

(Document Number)

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FL 32301

2015 MAY 29 AM 11:02

FILED

K. SALLY
EXAMINER

JUN - 2 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunshine 365 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:

Rebecca Diaz
Name of Person

Sunshine 365 LLC
Firm/Company

1351 NE Miami Gardens Dr, 701E
Address

Miami, FL, 33179
City/State and Zip Code

Rebecca.Diaz@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edwin Martinez at (646) 361 2137
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

TO
ARTICLES OF ORGANIZATION
OF

SUNSHINE 365 LLC

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

FILED
2015 MAY 29 AM 11:02
CLERK OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on

12/4/2014

and assigned

Florida document number

*L14000185525

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)

N

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

A

B. 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

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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR Manager	Edwin Martinez	655 SW 111th Way Apt 101	<input checked="" type="checkbox"/> Add
		Pembroke Pines, FL, 33025	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Elizabeth Martinez	655 SW 111th Way Apt 101	<input checked="" type="checkbox"/> Add
		Pembroke Pines, FL, 33025	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Luis Cortes	1501 SE 2nd Ct Apt. 3	<input checked="" type="checkbox"/> Add
		Ft. Lauderdale, FL, 33301	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2018 MAY 22 AM 10:02
SUN. MARIANA
TALLAHASSEE, FL

D. ~~PLEASE PRINT OR TYPE~~ If amending any other information please fill it in here:

Please amend the purpose of my business from "Real Estate & Insurance" to "Seller of Travel"

FILED
2015 MAY 29 AM 11:04
CLERK OF SUPERIOR COURT
ALBUQUERQUE, N.M.

E. Effective date, if other than the date of filing: 5/26/15 - U.D. (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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated May 23rd, 2015


Signature of a member or authorized representative of a member

Rebecca Diaz

Typed or printed name of signee