(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500283800745

04/05/16--01025--001 **30.80

200 AS -5 P 2: 1

APROG 2016 O.BRUCE

COVER LETTER

TO: Registration Ser Division of Corp				
SUBJECT:SU		stigative Seru ited Liability Company	ices LLC	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Dawn Go	nyaw		
		Name of Person		
		Firm/Company		
	_	,		
	P.O. BOX 130	2513		
		Address		
	Tampa, 710	rida. 33681-0 City/State and Zip Code	513	
	<u> Aurorainv</u> E-mail address: (estigative services	i@gmail.com	
For further information co	oncerning this matter, please ca			
Dawn Gon	49 6	at (813) 785- Area Code Daytime	S145 E E E E E E E E E E E E E E E E E E E	ernin ul
Name of		Area Code Daytime	Telephone Number H S S S S S S S S S S S S S S S S S S	
Enclosed is a check for th	k / -			
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, !> Certificate of Status &	
		(additional copy is enclosed)	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

Sunrise Investigative		-	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L1600027789</u>	were filed on $2-9-20$	and assign	ed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabl	lity company here:		
Aurora Investigative Serv	ices LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" o	r the abbreviation "L.L.C	."
Enter new principal offices address, if applicable:	7014 South Fi	tzgerald S	<u>`+.</u>
(Principal office address MUST BE A STREET ADDRESS)	Tampa, Flori	ida. 33611	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 13 Tampa, Florid	0513 a.33481-	<u>05</u> 13
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ALL the name of	the new
Name of New Registered Agent:	N/A		<u> </u>
New Registered Office Address:	Enter Florida street address	R 2	
		do do	
**	, Flori	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

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 = M AMBR = A	lanager .uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Remove
			☐ Change
^			□ Add
		•	□ Remove
			Change
			
	\ \		□ Remove
	1/1/	•	☐ Change
	N		Add
			E emove
			Change S
············		· · · · · · · · · · · · · · · · · · ·	Tale of the second
			Remove
			□ Change
·			
			☐ Remove
			□ Change

*****							_
The second secon					······································	*****	-
 		, 	 				-
		 	·		 		_
	**************************************						-
**************************************		······································			 		-
	· · · · · · · · · · · · · · · · · · ·		·•		<u></u>	· · · · · · · · · · · · · · · · · · ·	-
						<u> </u>	_
							-
44.4		· · · · · · · · · · · · · · · · · · ·					-
		* - * * - * * * * * * * * * * * * * * *				· • · · · · · · · · · · · · · · · · · 	-
							_
							-
**							-
		***************************************	· · · · · · · · · · · · · · · · · · ·				-
* 1. * * * * * * * * * * * * * * * * * *							_
Maria de la companya della companya della companya della companya de la companya della companya				· · · · · · · · · · · · · · · · · · ·			-
				 			-
Frective date, if other tha an effective date is listed, the da	n the date of filir	ng:	a data of filing or m	(opt	tional)	envent to 40	5 A'
ote: If the date inserted in t	this block does not	meet the applica	ble statutory filing	g requirements, th	is date wil	I not be list	ted
ocument's effective date on							
						2016	
e record specifies a de The 90th day after the	layed effective e record is filed	date, but not !.	an effective t	ime, at 12:01	a.m. on	the earli	er
<i>(</i>)		.•				1	
ated Upril	4	2080			Fither.		Train.
7	7	., Soft	 •			U	
• (-1	101.00	11000	-		22	$\dot{\omega}$	-
$\nearrow \chi$	/U.I.M -		a				

Page 3 of 3

Filing Fee: \$25.00