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(((H16000179732 3)))



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: (850)617-6383

Account Name : GRAYROBINSON, P.A. - ORLANDO Account Number : I20010000078 Phone

: (407)843-8880 ; (407)244-5690 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: melissa milligan @ gray-robinson. Com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUNRISE 302 INVESTMENTS, LLC

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Jul. 26. 2016 4:31PM

Gray Robinson

_ Ng. 1013 P. 2

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

H160001797323

Sunrise 302 Investments, LLC		
(Name of the Limited Liabilit (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Confered adocument number <u>L16000058288</u>	ompany were filed on March 21, 2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		SECRET
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	26
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		the name of the new
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

Jul. 26. 2016 4:31PM Gray Robinson

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	Debbie Gallagher	301 E. Pine Street, ste 1400 Orlando, 72 32801	DAA 🖃
		·	□ Remove
		801 E. Pine Street, ste	Change
MBR ———	David Harding	Orlando, 7L 32801	B Add
			Remove
			□ Change
		·	
			SECRETALLAHA 16 PROVE 16 PROVE 17 PROVE 18
			Charrie SA
			PM Add
			Remove
			Change
			Remove
			Change
			Add
			Remove
			Change

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Iffective date if at	her than the date of filing:		(optional)	
f an offective date is list	ed the date must be specific and cannot	be prior to date of filing or more	than 90 days after filing.) Pursuar	nt to 605.0207 (
<u>Note:</u> If the date inse locument's effective	erted in this block does not meet the date on the Department of State's r	applicable statutory filing records.	equirements, this date will not	; be listed as t
	•			
e record specifie	es a delayed effective date (out not an effective tim	e. at 12:01 a.m. on the	earlier of:
The 90th day at	fter the record is filed.		•	
		7		
Dated	29/16	<u>. </u>		
		or authorized representative of	b.a	

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